FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	MENT # P96000 LLIS CORPORATION	025072 (5	5)		H 1881 1841 1861 1861 1861
Principal Plac	e of Business	Mailing Address		T I TABAK BAN KIN TALIA BANKI NAKIH NA	IIM NAMAY MININ BANIN KANTA INA MAK
52-S HWY-17 DEBARY FL 3 US		PO BOX 1051 DEBARY FL 32713 US	Corred	DO NOT WRITE IN * 3. Date Incorporated or Qualified	THIS SPACE
	λ			03/15/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
2798°	7 Bellevue Ave	26		59-3364729	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	1 0 1 1 0	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Da	1 1 1 1 1	28	Country	Trust Fund Contribution	
Zip 24 3みい	Country 25 U.S.A	Zip	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	ne current year intangible
24 34 (8	9. Name and Address of Current		30	10. Name and Address of New Regist	
11. Pursuant office or I agent. I a	LIS, MICHAEL S HWY 17-92 BARY-FL-92713 To the provisions of Sections 607.0502 egistered agent, or both, in the State of maintain with, and accept the obligations.	and 607 1508, Florida Ste of Florida. Such change we ions of, Section 607 0505,	83 84 City	at Address (P.O. Box Number is Not Acceptable) Daytona Daytona de corporation submits this statement for the purporporation's board of directors. I hereby accept the	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered agric		NOTE Registered Agent signet		ATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
NAME STREET ADDRESS	DP HILLIS, MICHAEL - 52 S HWY-17-92 DEBARY-FL-	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	s	LI Change LI Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SP	L DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	s	Change Addition
TITLE		DELETE	3.1 TITLE		· Change Addition
NAME			3.2 NAME		; ·
STREET ADDRESS			3.3 STREET ADDRESS	s	
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS			4.3 SYREET ADDRESS	s	
CITY-ST-ZIP		7 21. 22.	4.4 CITY - ST - ZIP		Charac E Adam
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of changed, man an allactment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

(40t) 917-0005

FILED

Mar 19 1998 8:00am

Secretary of State

Addition