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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #**1. Corporation Name

P96000033228 (3)

MCATEER CLAIMS, INC.

Mailing Address Principal Place of Business SOUT NIM BOND DON'S

FILED Apr 23 1998 8:00am Secretary of State



CORAL SPRINGS FL 33065			CORAL SPRINGS FL 33065			DO NOT WOITE IN THIS S	DACE	
						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
Principal Pl	ace of Business	2a, Mailing	Addrose			04/12/1996 4. FEI Number	Applied F	
	ace of business	26 Vianitig /				65-0691083	Not Appli	-
Suite, Apt	# etc		Suite, Apt. #, etc.				\$8.75 Addition	
22	n, 010.	27	¬ı			5. Certificate of Status Desired Fee Required		
City & State	3		City & State			6. Election Campaign Financing	\$5.00 May B	e
23		26				Trust Fund Contribution	Added to Fees	,
Zıp	Country	Ζίρ	L	Country		8. This corporation owes or has paid the curr		ŧ
24 25 29			30	30			Yes No	
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
	icateer, John J Jr.			81	Name			
	807 N.W. 82ND DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)			
0	ORAL SPRINGS FL 3300	65		83				
				63				
				84	City	FL	85 Zip Code	
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508,	Florida Statutes, th	ne above	-named	corporation submits this statement for the purpose of	changing its registe	tered
agent. I a	egistered agent, or both, in m familiar with, and accept	the obligations of, Section	607.0505, Florida	Statutes	r the corp 3.	oration's board of directors. I hereby accept the appropriate	militioni as regiate	Teu
SIGNATURE								
	Signature, typed or printed name of re				ni signature	required when reinstating) CATE		
12.		CERS AND DIRECTORS		13.	r	ADDITIONS/CHANGES TO OFFICERS AND		ddition
TITLE	PT	-		1.1 TITLE	ļ		☐ change ☐ A	2010011
NAME	MCTEER, JOHN J J	R		1.2 NAME				
STREET ADDRESS	3607 NW 82 DR			1.3 STREET	I			
CITY-ST-ZIP	CORAL SPRINGS F			1.4 CITY - S 2.1 TITLE	T-ZIP		Change A	ddition
TITLE	MCATERR, TERESA	-		2.7 NAME			C Charge C	uonioi.
NAME	3807 NW 82 DR	. E		23 STREET	ADDRESS			
STREET ADDRESS	CORAL SPRINGS F	1		2.4 CITY-5				
CITY-ST-ZIP TITLE	COINE OF MITOS F			3.1 TITLE	31-2IF		☐ Change ☐ A	ddition
NAME		•	_	3.2 NAME				
STREET ADDRESS			•	3.3 STREET	ADDRESS			
CITY-ST-ZIP			•	3.4. CITY-5				
TITLE				4.1 TITLE	<u> </u>		☐ Change ☐ A	ddition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY~S	T-ZIP			
TITLE		I		5.1 TITLE			Change A	ddition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY - S	IT-ZIP			
TITLE			DELETE	6.1 TITLE			Change A	ddition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET	ADORESS			

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 12 or Block 13 if changed, or on an attachment with an address.

4/18/98

60-753-9919