

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

FILED
Feb 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000038101 (7)

1. Corporation Name

ALL THAT GLITTERS OF S.W. FLORIDA, INC.

Principal Place of Business

14661 EAGLES LOOKOUT COURT
FORT MYERS FL 33912
US

Mailing Address

14661 EAGLES LOOKOUT CRT
FORT MYERS FL 33912
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/24/1996

4. FEI Number

65-0675990

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 3512 S.W. 7TH TERRACE

Suite, Apt. #, etc.

22

City & State

23 CAPE CORAL, FLORIDA

Zip

Country

24 33991-1639

25

LEE

2a. Mailing Address

26 3512 S.W. 7TH TERRACE

Suite, Apt. #, etc.

27

City & State

28 CAPE CORAL, FLORIDA

Zip

Country

29 33991-1639

30

LEE

9. Name and Address of Current Registered Agent

MILLER, ROBERT
14661 EAGLES LOOKOUT COURT
FORT MYERS FL 33912

10. Name and Address of New Registered Agent

81 Name

ROBERT G. MILLER

82 Street Address (P.O. Box Number is Not Acceptable)

3512 S.W. 7TH TERRACE

83

84 City

CAPE CORAL

FL

85 Zip Code
33991

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Robert G. Miller

ROBERT G. MILLER, PRESIDENT

01/22/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
MILLER, ROBERT
14661 EAGLES LOOKOUT COURT
FORT MYERS FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
D/P/S/T
ROBERT G. MILLER
3512 S.W. 7TH TERRACE
CAPE CORAL, FLORIDA 33991-1639

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE

Robert G. Miller

ROBERT G. MILLER

01/22/98

(941) 283-6360

CR2E034 (10/97)