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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000039880 (5)

FRANNET OF FLORIDA, INC.

FILED Mar 12 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address		T URA I IRA I IRA DALLA BRILL
4701 CENTRAL AVENUE ST. PETERSBURG FL 33713		4701 CENTRAL AVENUE ST. PETERSBURG FL 33713		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
i				05/03/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 14/1	PARINA TERRACE	26 HITARINA	TEXPACA	59-3379630 Not Applicable
Suite, Apt		Suite, Apt. #, etc.	1-111-	\$9.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		_City & State 28 KCHSURE - IS/AN, FC		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	7m	Country	8. This corporation owes or has paid the current year Intangible
24 3371	06 25 USA-	29 33706	30 USA	Personal Property Tax due June 30.
	g, Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
BENTLEY, THAD 81 Name				
The state of the s				Addgess (P.Q. Box Number is Not Acceptable) _
ST PETERSBURG FL 33713			74	MAKINA JARRACE
,			83	
			B4 City	las I Zin Code
			1721	3451KE -FS/AND FL 85 Zip Code 33706
11. Pursuant to the provisions of Socions 607.0502 and 607.1508, f lorida 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				
Signature, lyped or profed came of registered agent end liftle if applicable (INOTE Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PVST	DETE LE	1.1 TITLE	□ Addition □
NAME	BENTLEY, THAD		1.2 NAME	1 10 a c 1 a Dred Att of
STREET ADDRESS	4701 CENTRAL AVENUE		1.3 STREET ADDRESS	14/1/AKINA TEKNICE
CITY-ST-ZIP	ST. PETERSBURG FL 33713		1.4 CITY-ST-ZIP	TRADICE TO LAND, FL 33706
TITLE		☐ DELETE	2.1 TITLE	/ ☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	
LITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-SI-ZIP		T or ere	3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	L.J Change L.J Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		Doutt	4.4 CITY-ST-ZIP	Change Addition
TITLE		☐ DELETE	5 1 TITLE	Li cuange Li Adoltoni
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	4.
CITY-ST-ZIP		☐ DELETE	5.4 City - St - ZiP	Change Addition
TITLE			6.1 TITLE	L. Grange L. Adorton
NAME			6.2 NAME	
STREET ADORESS			63 STREET ADDRESS	
CITY ST ZIP	partify that the information conclined with	n this films does not qualify for	6.4 CITY-ST-ZIP	od in Section 119 07/3Vi) Florida Statutes I further certify that the Information
14. Thereby o	certify that the information supplied with	 this filing does not qualify for 	r the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the Information

indicated on this armual report or supplemental armual 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.