## 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

			# P9600 GROUP, INC.	003997	74 (6)	)								
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Principal Place of Business Mailing Address									1 5 <b>0 0 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </b>	ieine binn boill féin	4E(   []) 0E	KAN TRAKO TARYA K		
P O BOX 22023 TAMPA FL 33622-2023					P O BOX 22023 TAMPA FL 33622-2023									
								ļ	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified					_
								l	•		a			ĺ
2.	2. Principal Place of Business			2a. Mailing	2a. Mailing Address				05/09/199 4. FEI Number	<b>70</b>			Applied For	┨
21	21			} <b>-</b>	26				59-33778	862		<b>—</b> —	ot Applicable	1
	Suite, Apt. #, etc.				Suito, Apt. #, etc.				5. Certificate of			\$8.75	Additional	7
22	22			27	- 4 - <u>- 4</u>				5. Certificate of	Status Desired		Fee F	Required	_}
23	City & State			City & 28	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					Į
	Zip Country Zip				Country			8, This corporati	ion owes or has	paid the cu	urrent year li	ntangible	7	
25			29					Personal Property Tax due June 30.  Yes No					_	
Name and Address of Current Registered Agent							Name		10. Name and A	ddress of New	Registered	Agent		4
			WALTER H.C.			81	Ivanie	, 						ļ
2212 E 4TH AVE TAMPA FL 33605						82		l Addres	s (P.O. Box <b>Nu</b> mb	er is Not Accep	table)			]
						83	<u> </u>							ļ
						84	City				Fί	85 Zip	Code	1
	office or n agent. I a	egistered ad	sions of Sections 607.0 gent, or both, in the Sta ith, and accept the obt	te of Florida. Such	n change <b>wa</b> s	authorized b	y the cor	d corpora rporation	ation submits this 's board of direct	statement for th ors. I hereby ac-	e purpose copt the ap	of changing pointment a	its registered s registered	
SI	GNATURE	Signature, type:	or pointed name of regellered a	agent and title if applicab	de (NC	DTE: Rog stored Ag	ent signaturi	re required t	when reinstating)		DATE			
12	2. OFFICERS AND DIRECTO			ND DIRECTORS					ADDITIONS/CH	HANGES TO OF	FICERS AN			]
TIT	1 1.5			DELETE		1.1 TITLE					Change	☐ Addition	1	
	VAME XOHARKES/XMOHAEK'S							LEE FOLK					1	
STREET ADDRESS XXXX EXAMEND X AVE. # 2.4 1.7  CITY-ST-ZIP  DERACK ROOM FL			k7						I AVENUE				ŀ	
CIT	Y-ST-ZIP	TAX KIKI	K INCOX X L		DELETE	1.4 City - 5 2.1 Title	ST-ZIP	TAM	PA, FL 33	605	<del></del>	Change	Addition	٦į
NAJ	i				C pretit	2.2 NAME		1				i onange	C. Acciden	ľ
	REET ADDRESS						T ADDRESS	1						1
CITY-ST-ZIP				2.4 CIT										
TITL					DELETE	3.1 TITLE	<del></del>	<b>†</b>			<del></del>	Change	☐ Addition	1
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CIT	Y-ST-ZIP				<del></del>	3.4. CITY-	ST-ZIP	<u> </u>		···				4
TITL	1				DELETE	4.1 TITLE						☐ Change	Addition	
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	Y-ST-ZIP				DELETE	4.4 CITY - S 5.1 TITLE	ST - ZIP	<del> </del>		<del></del>		Change	Addition	$\frac{1}{2}$
TITL	l l				OLLUE	5.1 THEE							L AUUIIUII	
• •	EET ADDRESS					5.3 STREET	ADDRESS							1
	Y-ST-ZIP					5.4 City-S								
ήτι			7		DELETE	6.1 TITLE		<del> </del>			·	Change	☐ Addition	1
N.	i i					6.2 NAME						•		1
	EET ADDRESS					63 STREET	ADDRESS	1						ļ
O.D.	/ CT 710					CAPITY O	T 710	1						1

14. Thereby 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 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.

H. LEE FOLK, PRESIDENT

4/30/98

**FILED** 

May 08 1998 8:00am

Secretary of State