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

**PROFIT** CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P96000042079 (9)

## WINDSOR INVESTMENT CORPORATION

## **FILED** May 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address  1844 N. BELCHER ROAD 1844 N. BELCHER ROAD #1017  CLEARWATER FL 34625 CLEARWATER FL 34625					ER ROAD						
					•			DO NOT WRITE IN THIS SPACE			
								<ol> <li>Date Incorporated or Qualified</li> <li>05/16/1996</li> </ol>			
2. Principal P	lace of Business		28.	Mailing Address	· · · · · <del>- ·</del>			4. FEI Number		A	pplied For
21			26					59-3376751		N	lot Applicable
Suite, Apt	#, etc		27	Suite, Apt. #, etc.				5. Certificate of Status Desired	)		Additional Required
City & State	e		1.1	City & State				6. Election Campaign Financing	٦		May Be
<b>Z</b> ip		Sountry	28	Z <sub>(P</sub> )	1 00	untry	,	Trust Fund Contribution			to Fees
24	<b>├</b> ─┐	zodniti <b>y</b>	29	24)	30	urniy	,	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	ne currer		ntangible No
[24]	25   o Name and	Address of Curre		ered Agent	30	7		10. Name and Address of New Regist			
QE.	ALS N'SKGNATU					81	Name	10.			
	22 22ND AVENU					L.		44 - 450 B			
SUITE 277						82	Street Ac	ddress (P.O. Box Number is Not Acceptable)			
• -	. PETERSBURG	FL 33710				83					
						84	Cata			5E 7:0	Code
						04	City		FL I	<b>85</b> Zip	Code
12.	Signature typed or profi	od name of tegesere (ac OFFICERS AN		TORS	13.		ent signature rei	avired when reinstating)  ADDITIONS/CHANGES TO OFFICERS			
TITLE	P			☐ DELET€	1.11	ITLE				Change	Addition
NAME	ROSATI, GU		_		1.21	IAME					
STREET ADDRESS		CHER RD., #10	17		133	FIREET	ADDRESS				
CITY-ST-ZIP	CLEARWATE	R FL 34825		Directo			ST - ZIP			7.06	T Large
TITLE				DELETE	2.1 1					_ Change	Addition
NAME					2.21						
STREET ADORESS							ADDRESS				
CITY-ST-ZIP TITLE				DELETE	3.11		ST-ZIP	<del></del>		Change	Addition
NAME					3.2 (				-		
STREET ADDRESS							ADDRESS				
CITY - ST - ZIP							SI-ZIP				
TITLE				DELETE	4.1				L	Change	Addition
NAME					4 2	NAME	ſ				
STREET ADDRESS					435	STREET	ADDRESS				
CITY-ST-ZIP		<u> </u>			440	CITY-5	ST - ZIP				
TITLE				☐ DELETE	511					Change	☐ Addition
NAME	•					NAME	1				
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP				Douges			ST - ZIP			T 01	T Large
TITLE				☐ DELETE	6.1		1		L	Change	Addition
NAME						NAME					
STREET ADDRESS							ADDRESS				
CITY-ST ZIP					<b>8</b> 640	JTY - S	S1 - ZIP				

14. Thereby certify that the information supplied with this filing does not quality 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.

Guy ROSATI