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

FILED Jan 26 1998 8:00am Secretary of State

DOCUMENT # P96000 1. Corporation Name ESHLEMAN ENTERPRISES, INC.	0049119 (6)		
Principal Place of Business	Mailing Address		
715 PINEWALK DRIVE	715 PINEWALK DRIVE		
BRANDON FL 33510	BRANDON FL 33510		
2. Principal Place of Business	2a. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22	27		5 Cartificate of Status Desired 1
City & State	City & State	····	
23	28		
Zip Country	Zip	Country	
24 25	29	30	Personal Property Tax due June 30. Yes No
g. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent
ESHLEMAN, GLORIA		81 Name	
715 PINEWALK DRIVE		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/10/1996 4. FEI Number 59-3383361 Not Applied For Not Applicable 5. Certificate of Status Desired 48. FE Required Fee Required Fee Required For Not Applicable 8. Election Campaign Financing Frust Fund Contribution Fee Required Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
BRANDON FL 33510			
		83	
		94 Cibi	lor 7:- Code
		1841 City	FL 85 Zip Code.
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, F	ites, the above-named corp authorized by the corpora lorida Statutes.	poration submits this statement for the purpose of changing its register tion's board of directors. I hereby accept the appointment as registered
SIGNATURE Signature, typed or printed name of registered age	an and title if applicable (A)C	TE Bookstored Least eleantive cond	CALIFOR ASTRONOMY THAT
12. OFFICERS AN			
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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:

LIGNETUBE BEOLERED

1/19/98 813-681-6054