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

Mailing Address

RIVERVIEW FL 33569

2a. Mailing Address

City & State

Suite, Apt. #, etc

SUITE 407

26

28

29

10308 MARSH HARBOR WAY

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

RIVERVIEW FL 33569

Suite, Apt. #, etc.

City & Stato

SUITE 407

22

23

24

Zιρ

SIGNATURE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

10308 MARSH HARBOR WAY

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000052016 (8)

MARCIA WHITE & ASSOCIATES, INC.

Country

g. Name and Address of Current Registered Agent

25

2909 W. BAY TO BAY BLVD.

SCHECHT, NEIL S

TAMPA FL 33629

PENTHOUSE

Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1.1 TITLE WHITE, MARCIA 1.2 NAME NAME 10308 MARSH HARBOR WAY, S-407 13 STREET ADDRESS STREET ADDRESS **RIVERVIEW FL 33569** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 21 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE Change 31 TITLE TITLE 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 41 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE

6.2 NAME

6.3 STREET ADDRESS

Country

83

84 City

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.

Name

30

FILED Mar 19 1998 8:00am Secretary of State

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DO NOT WRITE IN THIS SPACE

a. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Zip Code

Yes 🖊 No

Not Applicable

3. Date Incorporated or Qualified

06/17/1996

59-3391741

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

5. Certificate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

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 is 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 (8/3 March 13,1998 623-2359