## 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 # P96000053157 (9)

## FILED Feb 09 1998 8:00am Secretary of State

L R PF	ROPERTIE	is, in	IC.										
Principal Place of Business Mailing Address											OFFICE SOLDI DIFFI		#
1902 ORIENT	02 ORIENT ROAD												
TAMPA FL 33619 TAMPA FL 33619										DO NOT WRIT	TE INITIALO C	PDACE	
										3. Date Incorporated or Qualified			
										'			
2. Principal	Place of Bus		26,	2a, Mailing Address					<b>06/17/1996</b> 4. FEI Number			Applied For	
21			26	26					59-3388505		Not Applicable		
Suite, Apt	l. #, <b>el</b> c.			Suite, Apt. #, etc.					Certificate of Status Desired		\$8.75	Additional	
22			27						B. Certificate of Status Desired		Fee	Required	
City & Sta	ite		City & State					8. Election Campaign Financing		<b>4</b>	O May Be		
Zip	Country.				Zip Country					Trust Fund Contribution			d to Fees
24		Country			<del>-</del>			,		<ol> <li>This corporation owes or has personal Property Tax due Jun</li> </ol>			Intangible
[24]	g. Name and Address of Currer			29   rrent Registe						10. Name and Address of New R			
Fi						81	Name		10.				
	KLLER, JEFF		m A street #2	NOEA				0: .					
TA	2000				Street	Addres	ss (P.O. Box Number is Not Accepta	ible)		ļ			
,													
									1				
								City			FL	<b>85</b>   Zip	p Code
11. Pursuan	to the provis	sions c	of Sections 607	.0502 and 607	7.1508, Florida	Statutes,	the abov	e-named	corpor	ration submits this statement for the n's board of directors. I hereby acce	purpose of	changing	its registered
agent. I	registered a <u>j</u> am <b>fa</b> miliar v	geni, c vith, an	or txxim, in the a n <b>d</b> accept the c	state of Florida obligations of S	i. Such change Section 607.05	e was auth 505, Florida	a Statute:	y the cor s.	poratio	n's board of directors. I hereby acci	ept the appo	ointment a	is registered
SIGNATURE													
	Signature, lypo-	d ov boot	ed name of registers			(NOTE Re		nt signature	e required	when reinstating)	DATE		
12.	1 6		OFFICERS	AND DIRECT	ORS DELE		13.		T	ADDITIONS/CHANGES TO OFF		DIRECTC Change	- Titley
NAME	DAVEN	MOT	DODEDT									L Change	, D YOUNGO I
-	ME DAVENPORT, ROBERT REET ADDRESS 1902 ORIENT ROAD				12 N			ADDRESS					
CITY-\$T-ZIP	TAMPA						1.4 CITY - S						
TITLE	D	re og	010		DELE	TE	2.1 TITLE	1-21	<del> </del>			Change	Addition
NAME	DAVEN	PORT.	LINDA				2.2 NAME					_ ′	
STREET ADDRESS	1902 O				<b>a</b>			ADDRESS	ļ				
CITY-\$T-ZIP	TAMPA				2.40			S1-ZIP					
TITLE					☐ DELE	TE	3.1 TITLE					Change	Addition
NAME							3.2 NAME						
STREET ADDRESS							3.3 STREET	ADDRESS					J
CITY-ST-ZIP	<u></u>						3.4. CITY- S	31-7IP	<u> </u>				
TITLE					DELE	TE	4.1 TITLE					☐ Change	: Addition
NAME						1	4. 2 NAME						
STREET ADDRESS							4.3 STRFE1	ADDRESS					1
CITY-ST-ZIP					DELE	TE	4.4 CITY - S	T- 71P	<del> </del>			Chanca	Addition
TITLE					ריין מכנה	16	5.1 TITLE				l	Change	
NAME Street address							5.2 NAME 5.3 STREET	ADDDECC					1
CITY-ST-ZIP	1					J							1
TITLE	<del> </del>				☐ DELE	TE	5.4 CITY-S 6.1 TITLE	( - £ ) F	<del> </del>	<u></u>	<del></del> -	Change	Addition
NAME						·	62 NAME				,		
STREET ADDRESS							63 STREET	ADDRESS					
CITY-ST-ZIP						i	6.4 CITY-S						
dd basser				Julia Hair City		- 12E - 4 45			al la Oa	-11- 440 07/0V2 Ft-11- But	. (	25 1 1 1	

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 or suppliemental 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 attackment with an address.

SIGNATURE TOURS KASSILLES POR L

1/3/98 813-621-3960

CR2E034 (10/97)