## 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 # P96000055174 (2)

HARRIS, BUCHANAN & COMPANY, INC.

**FILED** Feb 10 1998 8:00am Secretary of State

|--|--|

Principal Place	e of Business	Ma	ailing Address					ARIDI AHDI BII	11 11E11 101	(1) <b>3</b>  9  1891		
2668 CHATEAU LN         P O BOX 11063           TALLAHASSEE FL 32311         TALLAHASSEE FL 32311           US         US				l	DO NOT WRITE IN THIS SP					PACE		
							3. Date Incorporated or Qualified 06/28/1996					
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number		Ap	plied For		
21		26					59-3384901			t Applicable		
Suite, Apt	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	□ <b>\$</b>	-	Additional		
22		27	On a Dist						Fee Re			
City & State		28	City & State						Added t			
Zip	and the second s			<b></b>	intry	'	8. This corporation owes or has paid					
24	9. Name and Address of Curre	[29]	tered Agent	30	1		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent					
4.4		nt Hegis	reseo Agent		81	Name	to. Name and Address of New Negro	Proton viño	<u> </u>			
	ARRIS, GENEVIEVE S 68 CHATEAU LANE											
	LLAHASSEE FL 32311				82	Street Addre	ess (P.O. Box Number is Not Acceptable	)				
10	ILLAMASSEE PL S2311				83	<u> </u>						
							· · · · · · · · · · · · · · · · · · ·		т =			
					84	City		FL  8	Zip (	Code		
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Floric	da. Such change was i	authorize	d by	the corporation	oration submits this statement for the pur on's board of directors. I hereby accept	pose of cha the appointr	nging its nent as	s registered registered		
SIGNATURE		,										
SIGNATORE	Signature, typed or preited name of registered so	end and little	if applicable (NOT		d Age	entippar erutan <b>g</b> ia Ine		DATE				
12.	OFFICERS AN	ID DIREC		13.			ADDITIONS/CHANGES TO OFFICE					
TITLE	PST CENTRATIVE C		L] DELETE	117	7			لــا	Change	☐ Addition		
NAME	HARRIS, GENEVIEVE S			121						17		
STREET ADDRESS	2668 CHATEAU LANE TALLAHASSEE FL					ADDRESS				1		
CITY-ST-ZIP	TALDANASSEE FL		DELETE	1.4 C		ST-ZIP		- п	Change	Addition		
TITLE				22 N					Diango			
NAME OTOGET ADDOGES						ADDRESS						
STREET ADDRESS						ST-ZIP						
CITY-ST-ZIP TITLE			DELETE	317		31-21			Change	Addition		
NAME			<u></u>	3.2 N					-			
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP						ST-ZIP						
TITLE			DELETE	4.1 T					Change	☐ Addition		
NAME				4.21	AME	Į.						
STREET ADDRESS				4.3 S	TREET	ADDRESS						
City-St-Zip				4.4 C	η <b>γ</b> . 9	ST-ZIP						
TITLE			☐ DELETE	5.1 T	LE.				Change	Addition		
NAME				5.2 N	L	-						
STREET ADDRESS				5.3 S	REET	ADDRESS						
CITY-ST-ZIP						ST-ZIP			-			
TITLE			DELETE	6.1 T	ŧξ			L	Change	☐ Addition		
NAME				6.2 N	AME							
STREET ADDRESS				6.3 S	TREET	ADDRESS						
CITY-ST-ZIP		- 1,17 JVV -				ST-ZIP	Section 119 07/3/ii) Florida Statutes 1 fu	mln n n n	4L _0 4L -	information		
14 I horohu d	control that the information cumpled o	anth flice f	mone done not cualify f	OF THE EV	ണെ	rion stated in S	secuon 119 076300 Florida Statutas 110	riner certify	mai ine	uutormation l		

Thereby certify that the information supplied with this tiling coes not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report to 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 attachment with an address