## 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 # P9600055837 (4)

FILED Mar 10 1998 8:00am Secretary of State

<ol> <li>Corporation</li> </ol>	n Name B <b>ORING,</b>	-	30000		, 1007 (H	,								
Principal Place of Business Mailing Address									7	r logitadi tia ibita attit botti Abiti Abiti A	#181 <b>#</b> 1181		HI 100: 100:	
					1401 HWY 301 NORTH			Į			:			
THONOTOSASSA FL 33592 THONOTOSASSA FL						1592	92			DO NOT WRITE IN THIS SPACE				
									-	Date Incorporated or Qualified	Inio oi	ACE		
									"	06/28/1996				
2. Principal Place of Business 2a. Mailing Address									4.	FEI Number		T <sub>A</sub>	pplied For	
21				26					65-0446507		<b>⊢</b>	ot Applicable		
Suite, Apt.	#, otc			Suite, Apt. #, etc.				1.				Additional		
22				27				8.	Certificate of Status Desired L		Fee R	equired		
City & State	e			City & State				6.	Election Campaign Financing	_		May Be		
23				28			Country		Д—	Trust Fund Contribution			to Fees	
Zip 24	·		Country		Zip		·y		8.	This corporation owes or has pald t	Pi		tangible DNo	
24 25 9, Name and Address of Curre				29 30 30						Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent				
RICHARDS, PHILLIP							īŢ	Name						
	401 HWY 3		1				82 Street Addre			O Doy Nimber to Net Assentable				
THONOTOSASSA FL 33592							[	Sueer Addre	Address (P.O. Box Number is Not Acceptable)					
							3	<del></del>						
ľ						8	4	City				85 Zip	Code	
											FL			
agent I a	to the provis egistered ag m familiar wi	ions of Sect jont, or both th, and acc	ions 607.0502 , in the State ept the obliga	2 and 607. of Florida itions of, S	1508, Florida Statu Such change was ection 607,0505, F	ites, the abo authorized l lorida Statut	ve by es.	i-named corpo the corporatio	oratio on's b	n submits this statement for the purp poard of directors. I hereby accept the	ose of one appo	changing i intment as	ts registered registered	
SIGNATURE	Signature, typed	or printed name	of registered ager	nt and lite if a	opticable (NO	III Registered A	ger	nt signature require	ed when	n reinslating)	DATE			
12.		0	FLICERS AND	DIRECTO		13.				ADDITIONS/CHANGES TO OFFICER				
TITLE	DICHAD	ne buill	NO.				1.1 TITLE				ι	Change	Addition	
NAME	ACADA LINEV DOA NICOTU							1.2 NAME						
THANATACACCA EL 22502				i			1.3 STREET ADDRESS 1.4 City-St-ZIP							
CITY-ST-ZIP TITLE	***************************************	100/100/1	1 2 00002		DELETE	2.1 THE	•	1 - ZIP				Change	Addition	
NAME						2.2 NAMI					•	0.12.190		
STREET ADDRESS						2.3 STRE		ADDRESS						
CITY-ST-ZIP						2.4 CITY								
TITLE					DELETE	3.1 TITLE						Change	Addition	
NAME						3 2 NAMI								
STREET ADDRESS						3.3 STRE	ET A	ADDRESS						
CITY-ST-ZIP						3.4. CITY	- S1	T-ZIP						
TITLE					DELETE	4.1 TITLE		-			L	Change	Addition	
NAME						4. 2 NAM								
STREET ADDRESS	ı					1		ADORESS						
CITY-ST-ZIP				- <del></del>	DELETE	4.4 CITY	_	1-ZIP				Change	Addition	
TITLE					ם מנוניה	5.1 TITLE						— cuange		
NAME CENTER ADDRESS						5.2 NAM		ADDOCCO						
STREET ADDRESS						5.3 STRE								
CITY-ST-ZIP TITLE				·- <del></del>	DELETE	5.4 CITY- 6.1 TITLE	•	- ZIF				Change	Addition	
NAME						6.2 NAMI					_			
STREET ADDRESS						6.3 STRE		ADDRESS						
CITY-ST-ZIP						6.4 City		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 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 trusted 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: Whillip E. Nichal

PHILLIP RICHARDS

MARCH 4, 1998

813-986-8867