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

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1. Corporation Nanno



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 04 1998 8:00am Secretary of State

l '	MENT # P960 OUTHPORT GROUP OF	00056904 (1) NORTH FLORIDA, INC.			
Principal Plac	e of Business	Mailing Address		T TRECCORY USE TRACE BOTTLE SOUTH BOTTLE BOTTLE BOTTLE BOTTLE	Talifa Minta Lann amant ands sadt
3402 WATERBRIDGE DR. 3402 WATERBRIDGE DR.					
TAMPA FL 33618		TAMPA FL 33618		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				07/02/1996	
	face of Business	2a. Mailing Address	**************************************	4, FEI Number	Applied For
21		26	····	59-3402361	Not Applicable
Suite, Apt. #, etc		Suito, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 _{(p}	Country		
24	25	<u> </u>	30	8. This corporation owes or has paid the of Personal Property Tax due June 30.	Yes No
	g. Name and Address of Cu			10. Name and Address of New Registers	
FURNARI, MICHAEL A 3803 PRESERVE COURT #14-308 TAMPA FL 33824				Michael A. Furnari Address (P.O. Box Number is Not Acceptable) 3402 Water bridge dr.	
		/ /	84 City	Tampa F	
office or r agent. I a SIGNATURE	to the provisions of Sections 69 egistered agent, or both, in the semination with, and accept the familiar with, and accept the Signature typed or pention name of regular OFFICE RS	Mithition of Section 607.0505, Flo	authorized by the corporate Statutes. Registered Agent signature 13.	corporation submits this statement for the purpose poration's board of directors. I hereby accept the a statement for the purpose poration's board of directors. I hereby accept the a statement for the purpose purpo	ND DIRECTORS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE	Ρ	Change
NAME	Furnari, Michael a		1.2 NAME	Michael A. Furnari 3402 Water bridgedr. Tampa FL 33618	
STREET ADDRESS	3803 PRESERVE COURT	#14-308	1.3 STREET ADDRESS	3402 Water bridgeds.	
City-St-ZiP	TAMPA FL 33624		1.4 CITY-ST-ZIP	Tampa FL 33618	
TITLE		L DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DETELE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		LL been	4. 2 NAME		C Cutality C 100 Months
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		,
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
44 I hereby (certify that the information cumplis	ad with this filera dogs not qualify fo	r the exemption state	d in Section 119 07(3Vi) Florida Statutes, Lifurther,	certify that the information

14. Thereby 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 supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under path, that I am an officer or director of the corporation or it. I become private 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 or interchiper with an address

SIGNATURE:

Michael Furnar

3 15 98 (813) 969-266