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

**PROFIT** CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000058443 (8)

**FILED** Mar 19 1998 8:00am Secretary of State

MATITI	EAA E• LIQUEU' IIAO•					
Principal Place	of Business	Mailing Address			r Ladindar in i inna dinir darn athri munit dinit disah	raini ataur midas infir isen
198 MANGO DR. 198 MANGO DR. PALATKA FL 32177 PALATKA FL 32177 US US					DO NOT WRITE IN THIS SI	PACE
					3. Date incorporated or Qualified 07/11/1996	
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3389100	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State City & State				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 🔀 No	
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered A	gent
FIS	HER, MATTHEW E		Į ē	1 Name		
174 HERON BAY CIRCLE			Te	2 Street Addr	ress (P.O. Box Number is Not Acceptable)	
LAKE MARY FL 32746			<u>_</u>			
			8	3		
			"	4 City	FL	85 Zip Code
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.						
SIGNATURE	Stonature, typod or printed name of registered a	non) and little if equipments (NOTI	F Bonistered i	Agent signature requi	ired when reinstating) DATE	
12.	OFFICE RS AND DIRECTORS  OFFICE RS AND DIRECTORS			go ii algazio e e e e	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	DP	DELETE 1.1		E		Change Addition
NAME	FISHER, MATTHEW E		1.2 NAM	IE		
STREET ADDRESS			1.3 STR	EET ADDRESS		
CITY-ST-ZIP			1.4 CITY	- ST- ZIP		
TITLE	DELETE 2:		2.1 TITL	E		Change Addition
NAME			2.2 NAW	IE		
STREET ADDRESS				EET ADDRESS		1 1
CITY-ST-ZIP			_	Y-ST-ZIP		Alesta 1 Addition
TITLE			3.1 TITL			Change Addition
NAME			3.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		- Delete		Y-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.1 TITL			
NAME			4.2 NA	VIÉ		

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 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.

4.3 STREET ADDRESS

**5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETE

DELETE

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

Motthew E Fisher

Change

Change

Addition

Addition