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 # P96000060313 (9)

OLDE TYMES ENTERPRISES, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business		Mailing Add	Mailing Address			r inditeli tin snija Atiti antit antit antit antit antit antit antit baten titet tinak titi tabt		
15328 NORTH NEBRASKA AVENUE TAMPA FL 33613			15328 NORTH NEBRASKA AVENUE TAMPA FL 33613					
		TAMPA FL				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualif	ied	
						07/18/1996		
2. Principal Pl	ace of Business	2a. Mailing	Address			4, FEI Number		Applied For
21		26				59-3390894	 -	Not Applicable
Suite, Apt. #, etc.		-,	Suite, Apt. #, etc.				¢0.75	Additional
22		k	27			5. Certificate of Status Desired	1 1361 -	Required
City & State)		City & State			6. Election Campaign Financin	na \$5.0	0 May Be
23		28	28			Trust Fund Contribution		d to Fees
Zip	Country	Zip		Country	,	a. This corporation owes or ha	is paid the current year I	ntangible
24	25	29	30	5]		Personal Property Tax due		№ Νο
	g. Name and Address of Curre	nt Registered Ag	ent			10. Name and Address of Nev	w Registered Agent	
AMERILAWYER CHARTERED					Name			
343 ALMERIA AVENUE				82	Ctroot A	Address (P.O. Box Number is Not Acce	antahio)	
CORAL GABLES FL 33134				62	SHEELF	duress (r.O. box Number is Not Acce	spiable)	
, , , , , , , , , , , , , , , , , , ,	THE GABLEOTE GOTOT			B3				
					ļ			
				84	City		FL 85 Zip	Code
11 Pursuant t	to the provisions of Sections 607 050	02 and 607 1508	Florida Statutes	the abov	ie-named d	corporation submits this statement for		its registered
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 Signature type disjunited name of registered agent and the Plapphophic (NOTE Registered Agent signature required when reinstating) DATE								
The state of the s					in signature r	ADDITIONS/CHANGES TO C		ADC IN 12
12.	PSD		DELETE	13. 11 TITLE		ADDITIONS/CHANGES TO C	Change	
NAME	\$ZUCS, INGRID	'		1.2 NAME				
STREET ADDRESS	15328 NORTH NEBRASKA A	VENILE		1.3 STREET	Amporee			
	TAMPA FL 33613	YLITOL		1.3 STACE	- 1			Į.
CITY-ST-ZIP TITLE	VTD		DELETE	21 TITLE	51 - 7 F		Change	Addition
	SZUCS, B. STEVEN	'		22 NAME				
NAME	15328 NORTH NEBRASKA A	VENITE		2.3 STREET ADDRESS 2.4 City-St-Zip				
STREET ADDRESS	TAMPA FL 33813	ACIAOE						
CITY-ST-ZIP	IMPA PL 33013		DELETE	31 TITLE	21-71		Change	Addition
TITLE		'					f -1 cuantic	
NAME				3.2 NAME	ADDRESS			ļ
STREET ADDRESS				3 3 STREET				
CITY-ST-ZIP		······································	DELETE	3.4. CITY- 4.1 TITLE	SI-ZIP		Change	Addition
TITLE		'	WELLETT.					
NAME				4. 2 NAME	4000000			
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP			DELETE	4.4 CITY-3	ST-ZIP		Change	Addition
TITLÉ] DEL et e	5.1 TITLE				
NAME				5.2 NAME	1	9000025 -05/08/9801	1 L DOS	
STREET ADDRESS				5.3 STREE	- 1	-02/08/3801	032016	
CITY-ST-ZIP			Decem	5.4 CITY - 3	S1-ZIP	***158 . 75		# J J J J J J J J J J J J J J J J J J J
TITLE			DELETE	6.1 TITLE			☐ Change	Addition
NAME				6.2 NAME				*\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
STREET ADDRESS				6.3 STREE	ADDRESS			<i>J</i> 6\1
CITY-ST-ZIP				6.4 CITY - 5	S1-20P			

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 informatio indicated on this annual report or supplientental 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 or an attachment with an address.