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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000060710 (6)

	er's aut	1	ALES, INC.					·					
Principal Place of Business Mailing Address										r concent tin tang attit datit kante batti 20	erm preis m#101 (096))	*** ##11 1981	
1145 EAST ROSE ST 1145 EAST ROSE ST LAKELAND FL 33801 LAKELAND FL 33801													
US US										DO NOT WRITE IN THIS SPACE			
ļ					•					3. Date Incorporated or Qualified		Ę	
										07/16/1996	······································		
2. Principal Place of Business					2a. Mailing Address					4. FEI Number	├ ─ ⋠	Applied For	
Suite, Apt. #, etc.					Suite Apt. #, etc.					59-3392955		lot Applicable Additional	
22	n, 010.			27	27					5. Certificate of Status Desired		Required	
City & Stat	e				City & State					6. Election Campaign Financing	\$5.00	May Be	
23				28	8					Trust Fund Contribution Added to Fees			
Zip	p Country				Zip Cour			,	8. This corporation owes or has			ntangible	
24	25			29	30				Personal Property Tax due June 30. Yes No			□ No	
9, Name and Address of Current Registered Agent										10. Name and Address of New Regist	tered Agent		
	nner, Dav						81	Name				ļ	
1145 ROSE STREET EAST LAKELAND FL 33801							82 Street Adde			ess (P.O. Box Number is Not Acceptable)			
14				83									
							03					-	
								City	FL 85 Zip Code				
11. Pursuant	to the provis	ions (f Sections 607.050	2 and 6	07.1508, Florida St	atutes, the a	Dove	L e-named	corpo	pration submits this statement for the purp		its registered	
office or r	registered ag im familiar w	jent, c ith an	ir both, in the State id accept the obliga	of Floria	da Such chan ge w f Section 607.0505	as authorize Florida Sta	d by tutes	the corp	poratio	oration submits this statement for the purp on's board of directors. I hereby accept th	ie appointment a	s registered	
SIGNATURE						,						ļ	
Old Williams	Signature, typed	or pool	ed hame of registered age			(NOTE: Registere	d Ago	ent signature	require		DATE		
12.	DDT		OFFICERS ANI) DIRLO		13.	T. F.		F	ADDITIONS/CHANGES TO OFFICER	S AND BIRECTO	RS IN 1	
TITLE	DPT		SAPS A4		∐ DEL€1E	1.1 TI			ι		, Clarity	· S Addition	
NAME OVERT ADDRESS	GUNNER, DAVIO M							1.2 NAME		735 Buckingham Ave	ı.	:	
	STREET ADDRESS 303 SUMMERFIELD DRIVE CITY-ST-ZIP WINTER HAVEN FL 33880									AKEINNO, FL. 33803	.	_	
CITY-ST-ZIP TITLE	DV				DELETE			1.4 CITY-ST-ZIP - 2.1 TITLE		TRESIDENT WP>		Addition	
NAME	, -,	D KA	DIN M		T			2.2 NAME		EORGE W. GUNNER			
STREET ADDRESS	GUNNER, KARIN M 303 SUMMERFIELD DRIVE							ADDRESS	2	.735 Buckingham Av	•		
CITY-ST-ZIP	MARKET HELEN AND DE				4			ST-ZIP		akeland FL. 33883	-		
TITLE	D				DELETE	3 1 TI					Change		
NAME	SCHWA	RZNA	IU, ERNA			3.2 N	AME]	
STREET ADDRESS	816 ARI	ETTA	CIRCLE W.			3.3 S	TREET	ADDRESS	ĺ				
CITY-ST-ZIP	AUBERN	IDALI	E FL 33823			3.4 0	HTY-S	ST-ZIP					
TITLE					☐ DELETE	4,1 (TLE				Change	Addition	
NAME						4.21	IAME						
STREET ADDRESS						4.3 S	TREET	ADDRESS					
CITY-ST-ZIP					DELETE			T-ZIP	 		Change	Addition	
TITLE					DELETE	5.1 7					∟ ciiange	ויטוווסטא ויין	
NAME						5.2 N		4000000					
STREET ADDRESS								ADDRESS					
CITY-ST-ZIP TITLE					DELETE	5.4 C		T - ZIP			Change	Addition	
NAME						62 N							
STREET ADDRESS								ADDRESS					
STILL PROPERTY	15					0.50			l				

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 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.