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

PROFIT. CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1998 8:00am

Sandra B. Mortham

•	JAL REPORT 1998			s. Mortham ry of State CORPORATIONS	Secretary	of Sta	te
	MENT # F	P96000061	229 (6)			8/18: 11815 11814 NA(A))8/1	1861
Principal Place of Business 8904 DELTA LANE TAMPA FL 33835		6904	Mailing Address B904 DELTA LANE TAMPA FL 33635		1 1881 1881 188 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881		1001
	-				DO NOT WRITE IN TH 3. Date incorporated or Qualified	IS SPACE	
					07/19/1996		
	ace of Business		iling Address		4. FEI Number	Applied	
Suite, Apt.	# etc	26	ite, Apt. #, etc.		59-3389767	Not App \$8.75 Addition	
2		27]	no, 7421. 17 Old.		5. Certificate of Status Desired	Fee Require	
City & State		28	y & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fee	
Zip 4	Coun	· — — ·)	Country	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangib	
4	9, Name and Add	29 ress of Current Registere	d Agent	30	10. Name and Address of New Registers		
FUI	NN, LAURA B			81 Name			
8904 DELTA LANE			82 Street Add	Iress (P.O. Box Number is Not Acceptable)			
TAN	MPA FL 33635			83			~
				84 City		85 Zip Code	
11. Pursuant t	o the provisions of Se egistered agent, or bo	ctions 607 0502 and 607.1	508, Florida Statut Such change was a	es, the above-named cor authorized by the corpora	poration submits this statement for the purpose	of changing its regi	istered tered
office or re agent. I ar SIGNATURE	e giste rod agent, or ho in fam iliar with, and ac Si gna ture typed or printed na	ctions 607 0502 and 607 to the state of Florida 5 scept the obligations of Sector of Ingelia and tilk if any OFFICERS AND DIRECTO	Such change was a section 607.0505, Fig.	es, the above-named cor authorized by the corpora orida Statutes. F. Registered Agent signatute requ. 13.	poration submits this statement for the purpose ation's board of directors. I hereby accept the a sted when reinstating) DATE	of changing its regist popintment as regist	tered
office of re agent. I an SIGNATURE	egistered agent, or be n familiar with, and ac Signature typed or printed rea DP	oth, in the State of Florida Scept the obligations of, Se me of registered agent and title if app OFFICERS AND DIRECTO	Such change was a section 607.0505, Fig.	authorized by the corpora orida Statutes. E Rogistered Agent signatute requ	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	e of changing its regist appointment as regist in DD DIRECTORS IN	tered
office of reagent. I are agent. I are signature. 12. ITILE VAME	egistered agent, or be n familiar with, and ac Signature typed or printed rea DP FLINN, LAURA E 8904 DELTA LAI	oth, in the State of Florida. Secrept the obligations of, Se me of registered agent and tilk, if any OFFICE RS AND DIRECTO	Such change was a cition 607.0505, Fix cable (NOT	authorized by the corpora orida Statutes. F. Rogistered Agent signatute requ	poration submits this statement for the purpose ation's board of directors. I hereby accept the a sted when reinstating) DATE	e of changing its regist appointment as regist in DD DIRECTORS IN	tered
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