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

**PROFIT** CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



ELORIDA DEPARTMENT DE STATE

**FILED** 

Apr 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000063177 (5) DOCUMENT #

PINEAPPLE BAY TRADING COMPANY, INC.

Mailing Address Principal Place of Business 512 S PINEAPPLE AVE 15 PARADISE PLAZA SARASOTA FL 34236 DO NOT WRITE IN THIS SPACE SARASOTA FL 34239 3. Date Incorporated or Qualified 07/26/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0696010 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State City & State **\$5.00** May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Ζip Country Zip XX Yes Personal Property Tax due June 30. 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 MILES. D W 512 S PINEAPPLE AVE Street Address (P.O. Box Number is Not Acceptable) 82 SARASOTA FL 34326 **R**3 Zip Code 84 City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE MILES, DW 1.2 NAME NAME **512 S PINEAPPLE AVE** STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34326 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 2.1 T(TLE MILES, D W 2.2 NAME NAME 512 S PINEAPPLE AVE 2.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34326 2. 4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAMÉ 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREFT ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change ■ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 trustee in powered 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 indirect.