## 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 # P96000067361 (1)

INNERCITY EQUITY HOLDINGS, INC.

## **FILED** May 13 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Addross			n dans baret diest sonat militainte mit int.	
1809 SEAGULL DRIVE 1909 SEAGULL DRIVE						
CLEARWATER FL 34624 CLEARWATER FL 34624				OO NOT W	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualific		
				08/14/1996	1	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 8954	Antigua Drive		mricua De		Not Applicable	
Suite, Apt.		S⊔ite, Apt. #, etc.			CR 75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6, Election Campaign Financin	9 \$5.00 May Be	
23 LARG	so, FLORIDA	28 LAR60	FLORIDA	Trust Fund Contribution	Added to Fees	
Zip	Country	Уф.	Country		paid the current year Intangible	
24 337		29 33777	30 USA	Personal Property Tax due J		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
ROSS, ANDREW R R. ROSS						
1909 SEAGULL DRIVE 82 Street Address				Address (P.O. Box Number is Not Accel		
CLEARWATER FL 34624 83				1734 AMIGUA D	rive	
			83			
			84 City		85 Zip Code	
	4000000	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		ARGO	FL 33777	
f 11. Pursuant i	to t <b>he</b> provisions of Sections 607.050; egistered agent, or both, in the State	and 607,1508, Florida Statute of Dorida, Such change was a	es, trie above-named authorized by the cor	I corporation submits this statement for the poration's board of directors. I hereby according to the control of the control o	ne purpose of changing its registered	
agent. La	m familiar with, and accept the oblige				11/2 105	
SIGNATURE Signature typeon in proceed serveral ricipatoriest appear and the Tappacidate (NOTE: Registered Agent signature required when				o required when rejector not	4/26/98	
12.	OFFICERS AND		13.		FICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	PD	Change Addition	
NAME	ROSS, ANDREW R		1.2 NAME	ANDREW R. ROSS		
STREET ADDRESS	1909 SEAGULL DRIVE		1.3 STREET ADDRESS	8454 ANTIGUA DEIU	ح.  }	
CITY-ST-ZIP	CLEARWATER FL 34624		1.4 CITY - ST - ZIP	LARGO FLORIDA :	3777	
TITLE	PD	DELETE	2.1 TITLE		Change Addition	
NAME (	GEPHART, CLIFFORD A		2.2 NAME			
STREET ADDRESS	524 3RD STREET NORTH		2.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33701		2. 4 CITY - S1 - ZIP	<u> </u>		
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		ļ	
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	1	Change Addition	
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME	(		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		D bei Fre	5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE	•	☐ Change ☐ Addition	
NAME			6.2 NAME	1		
STREET ADDRESS			6.3 STREET ADDRESS	\ 		
CITY-ST-ZIP			6.4 CITY - ST - ZIP	<u> </u>		

14. I hereby certify that the information supplied with this filling 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 or an attempt with an address.

1/2 /00 (0m) 301-31