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 # P96000071686 (5)

STRINGAPURRS, INC.

Principal Place of Business 3905 SAN GABRIEL DRIVE PENSACOLA FL 32504 Mailing Address

3905 SAN GABRIEL DRIVE PENSACOLA FL 32504 FILED Apr 14 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

									j	3. Date Incorporated or Qualified 08/26/1996		
2. Principal Place of Business				2a. Mailing Address						4. FEI Number 67 - 3501044 Appl	ied For	
21				26						ADPLIED FOR Not	Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired Fee Requ		
City & State				City & State								
Zip Country				Zip Cou								
	25 29 30					├ ─¬	¬ '			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9, Name and Address of Current Registered Agent							<u> </u>			10. Name and Address of New Registered Agent		
GULLAHORN, JEAN R								81 Name				
3905 SAN GABRIEL DRIVE												
· · · · · · · · · · · · · · · · · · ·							62	82 Street Address (P.O. Box Number is Not Acceptable)				
PENSACOLA FL 32504							83					
							[53]					
							84	City		FL 85 Zip Co	de	
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												
							agistered Agent algnature requir		required			
12.	-	OFFICERS AND	DIHE	CTORS	T priest	13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	CHILAL	IODAL IEANI D			DELETE	1.1 T				☐ Change	Addition	
NAME GULLAHORN, JEAN R						12 N	1.2 NAME					
STREET ADDRESS 3905 SAN GABRIEL DRIVE						1.3 9	1.3 STREET ADDRESS					
CITY-ST-ZIP		OLA FL 32504				1.40	ITY - ST	T-ZIP				
TITLE	S/T				☐ DELETE	2.1 T	ITLE			☐ Change	Addition	
105		iorn, John D					2.2 NAME				-	
STREET ADDRESS		IN GABRIEL DRIVE		2.3			2.3 STREET ADDRESS					
-Offy-ST-ZIP	PENSAC	OLA FL 32504				2.44	OTY-S	T-ZIP			J	
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NAME				3.2 N	3.2 NAME							
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CITY-ST-ZIP							3.4. CITY-ST-ZIP					
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					ال المدداد	6.1 ¥		i		Change	Addition	
NAME						6.2 N		ł			}	
STREET ADDRESS						6.3 S	TREET	address				
CITY-ST-ZIP	- 4.6 . 6					6.4 C	ITY - ST	-ZIP				
indicated	errity that the	e information supplied wit al report or supplemental	in this f annua	iling doe I report i	es not qualify fo is true and acc	or the ex curate an	empt d tha	ion state it my sigi	d in Se nature	ection 119.07(3)(i), Florida Statutes. I further certify that the in a shall have the same legal effect as if made under oath; that I	formation am an	