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May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000080924 (9)

1. Corporation Name
BASKETIQUE, INC.



Principal Place of Business

Mailing Address

667 KINGLSEY AVE
ORANGE PARK FL 32073
US

667 KINGSLEY AVE
ORANGE PARK FL 32073
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/26/1996

4. FEI Number

59-3400170

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 727 KINGSLEY AVE

Suite, Apt. #, etc.

22 City & State

23 ORANGE PARK FL

Zip

24 32073

Country

25 US

2a. Mailing Address

26 727 KINGSLEY AVE

Suite, Apt. #, etc.

27 City & State

28 ORANGE PARK FL

Zip

29 32073

Country

30 US

9. Name and Address of Current Registered Agent

CHADWICK, LESLEY
667 KINGSLEY AVE
ORANGE PARK FL 32073

10. Name and Address of New Registered Agent

81 Name

CHADWICK LESLEY

82 Street Address (P.O. Box Number is Not Acceptable)

727 KINGSLEY AVE

83

84 City

ORANGE PARK

FL

85 Zip Code

32073

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DP
STREET ADDRESS CHADWICK, LESLEY
CITY-ST-ZIP 2780 FOREST OAKS DRIVE
ORANGE PARK FL

TITLE ☐ DELETE

NAME DS
STREET ADDRESS CHADWICK, GRAHAM
CITY-ST-ZIP 2780 FOREST OAKS DRIVE
ORANGE PARK FL

TITLE ☐ DELETE

NAME DVP
STREET ADDRESS DILLEY, NICOLA
CITY-ST-ZIP 1576 VILLAGE WAY
ORANGE PARK FL

TITLE ☐ DELETE

NAME DT
STREET ADDRESS DILLEY, VINCENT
CITY-ST-ZIP 1576 VILLAGE WAY
ORANGE PARK FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby 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 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

SIGNATURE

[Signature]

[Signature]

CP2E034 (10/97)