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 # P96000081597 (2)

PEARCE ENTERPRISES, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address	Mailing Address			f 1881188f um Inite attit antit natit antit antit talet telet frite telet inet			
900 S.R. 13		900 S.R. 13							
JACKSONVILLE FL 32259		JACKSONVILLE F	JACKSONVILLE FL 32259			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	SPACE	· 	
						10/02/1996			
9 Principal Pl	ace of Business	2a. Mailing Addres				4. FEI Number		oplied For	
<u> </u>	ace of Dusiness	26. Walling Addres	55			59-3404628		ot Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				\$8.75		
22		<u>├</u> ——	27			5. Certificate of Status Desired		equired	
City & State	3		City & State			6. Election Campaign Financing			
23		1	28			Trust Fund Contribution			
Zip	Country	Zip	Country			8. This corporation owes or has paid the c	urrent year Inf	tangible	
24	25	29	30			Personal Property Tax due June 30.] No	
	g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
PEARCE, JANICE L				81	Name				
900 S.R. 13				82	Stepot Addre	Address (P.O. Box Number is Not Acceptable)			
	XSONVILLE FL 32259		OZ Street A		Street Addres	ess (F.O. DOX Number is NOt Acceptable)		ļ	
				83					
					Carr			Codo	
				84	City	Fi	L 85 Zip (Code	
11. Pursuant t	to the provisions of Sections 607 050	02 and 607.1508, Florida	Statutes, the al	bove	-named corpo			ts registered	
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 Stuch 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 registured again and title if applicable (NOTE: Registered Agant signature required when reinstalling) DATE									
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D	☐ DELI	1.1 TI	TLE			Change	☐ Addition	
NAME PEARCE, JANICE L			1.2 NAME						
STREET ADDRESS 900 S.R. 13			1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL 32259			1.4 CITY-ST-ZIP			- 1-4		
THILE	D	☐ DELI	TE 2.1 TI	2.1 TITLE			L Change	Addition	
NAME	PEARCE, CARL		22 N		-				
STREET ADDRESS	900 S.R. 13		2.3 ST		ADDRESS			1	
CITY-ST-ZIP	JACKSONVILLE FL 32259		2.4 CITY-ST-Z		T-ZIP				
TITLE		☐ DELI	DELETE 3.1 TITLE				L_I Change	Addition	
NAME			3.2 N/	AME					
STREET ADDRESS			3.3 \$1	rreet i	ADDRESS				
CITY-ST-ZIP	······································			3 4. CITY - ST - ZIP			<u> </u>		
TITLE		☐ DELI					∐ Change	Addition	
NAME			4. 2 N					ŀ	
STREET ADDRESS			4.3 ST	TREET A	ADDRESS			ļ	
CITY-ST-ZIP				TY-ST	-ZIP	······································	· III o.	11100	
TITLE				5.1 TITLE			Change	Addition	
NAME	•		5.2 NA						
STREET ADDRESS					ADDRESS			}	
CITY-ST-ZIP				TY-ST	-ZIP		Пан	T target	
TITLE		☐ DELI					Change	☐ Addition	
NAME		5	6.2 NA						
STREET ADDRESS			6.3 \$1	TREET A	address				
CITY-ST-ZIP			6.4 CI	IY-S1	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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attaching it with an address.

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