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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretally of State 1 DIVISION OF CORPORATIONS

DOCUMENT #

P96000082226 (7)

FILED May 19 1998 8:00am Secretary of State

Principal Plac 12710 ENGLIS TAMPA FL 33 US	SH HILLS CT		12710	J Address ENGLISH I A FL 33617	HILLS CT			3.		DO NOT W	/RITE II	*****	11810 11910		
								_	10/04/199	36					
2. Principal P	Place of Business		2a. Mai	iling Addre	ess			4.	FEI Number					Applied For	
21			26						59-3404	242				Not Applicabl	
Suite, Apt.	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.	5. Certificate of Status Desired			1 1 7		8.75 Additional Fee Required	
City & Stat	o		(City	& State				6.	Election Carr Trust Fund C	paign Financir ontribution	ng			O May Be d to Fees	
Zip	[Country	Zip			Country	,	8.	This corporal	tion owes or ha	as paid	the curr	ent year	Intangible	
24	25		29	<u> </u>	30	0				perty Tax due .			Yes	☐ No	
	9, Name and	Address of Curre	nt Registere	d Agent				10.	Name and A	ddress of Nev	w Regi	stered A	gent		
INT	RASTATE REGI	STERED AGENT	COPORATI	ON		81	Name								
	1 BRICKELL AVI					82	Street A	ddress (P	ess (P.O. Box Number is Not Acceptable)						
MIA	AMI FL 33131					83						·			
						0.4	City						100 7	n Codo	
						84	City					FL	85 Zi	p Code	
44 Purcuant	to the provisions	J Sections 607.05	02 and 607 19	508 Florid	la Statulas	the show	p-named c	corporatio	o cubmite this	statement for	the nu	rnaea al	changing		
11. Pursuant office or r agent. I a SIGNATURE	ım f am iliər with, ad	of Sections 607.05 or both in the State of accept the oblig eat swir et regelered a	gations of, Sec	ction 607.0	0505, Floric	, the above thorized by da Statutes Registered Ago	S.			statement for tors. I hereby a	the pur	the appo	changing pintment	as registered	
agent. I a SIGNATURE	im f amil iar with, an	id accept the oblig	gations of, Sec மாக்காட்ர்வுற	ction 607.0	0505, Etoric	da Statutes Registered Age	S.	required when	reinstating)	statement for tors. I hereby a		DATE RS AND	DIRECTO	ORS IN 12	
agent. I a	om familiar with, an Signature typed or pre	od accept the oblig cal sanic of injectives at Of FICERS At	gations of, Sec மாக்காட்ர்வுற	otion 607.0	0505, Etoric	da Statutes	S.	required when	reinstating)			DATE RS AND		ORS IN 12	
agent. I a SIGNATURE	Signature typed of pro-	of accept the oblig technic obspected as OFFICERS AN	gations of, Sec மாக்காட்ர்வுற	ction 607.0	0505, Etoric	da Statutes Registered Age	S.	required when	reinstating)			DATE RS AND	DIRECTO	ORS IN 12	
agent. I a SIGNATURE 12. TITLE	D CHRISTOPH 6202 EMMO	ed accept the oblig est same of explored as OFFICERS AT ER, BRIAN NS LANE	gations of, Sec மாக்காட்ர்வுற	ction 607.0	0505, Etoric	da Stalutes Registered Age 13. 1.1 Till E	S. ent signature re	required when	reinstating)			DATE RS AND	DIRECTO	ORS IN 12	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTOPH 6202 EMMO TAMPA FL 3	ed accept the oblig est same of explored as OFFICERS AT ER, BRIAN NS LANE	gations of, Sec மாக்காட்ர்வுற	ction 607.0	(NOTE B	Tagistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 City-S	ent signature n	required when	reinstating)			DATE RS AND	DIRECTO Change	DRS IN 12	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D CHRISTOPHI 6202 EMMO TAMPA FL 3	of accept the oblig of LICERS AN ER, BRIAN NS LANE 3847	gations of, Sec மாக்காட்ர்வுற	ction 607.0	(NOTE B	Tagistered Age 13. 1.1 TILLE 1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TILLE	ent signature n	required when	reinstating)			DATE RS AND	DIRECTO	DRS IN 12	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.0	(NOTE B	Hegistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 2.2 NAME	s. and signature in ADDRESS T- ZIP	required when	reinstating)			DATE RS AND	DIRECTO Change	DRS IN 12	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.0	(NOTE B	Tegistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Change	DRS IN 12	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	OSOS, FIORICE (NOTE FI	Tagistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TILE 2.2 NAME 2.3 STREET 2.4 CITY-S	ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.0	OSOS, FIORICE (NOTE FI	Tegistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE	ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Change	DRS IN 12 e Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	OSOS, FIORICE (NOTE FI	Tegisterod Ago 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2 4 CITY-S 3 1 TITLE 3.2 NAME	ADDRESS S1-ZIP ADDRESS S1-ZIP	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	OSOS, FIORICE (NOTE FI	Tegisterod Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET	ADDRESS S1-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	(NOTE FI	Tegisterod Ago 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2 4 CITY-S 3 1 TITLE 3.2 NAME	ADDRESS S1-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e Addition e Addition	
BY B	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	(NOTE FI	Tegisterod Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE	ADDRESS S1-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e Addition e Addition	
BY B	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	(NOTE FI	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE	ADDRESS S1-ZIP ADDRESS S1-ZIP	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e Addition e Addition	
BIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	(NOTE FI	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e Addition e Addition	
BY B	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	ction 607.C	CHOIC F	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE	ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP	required when	reinstating)			DATE RS AND	DIRECTO Chang	DRS IN 12 e	
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	DEL	CHOIC F	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S	ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP	required when	reinstating)			DATE RS AND	DIRECTO Change Change Change	DRS IN 12 e	
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	DEL	CHOIC F	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CHY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.1 TITLE	ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP	required when	reinstating)			DATE RS AND	DIRECTO Change Change Change	DRS IN 12 e	
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	DEL	CHOIC F	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CHY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.2 NAME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Change Change Change	DRS IN 12 e	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	DEL	COSO, FTORICE (NOTE FILETE LETE LETE LETE LETE	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Change Change Change	DRS IN 12 e	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	DEL	COSO, FTORICE (NOTE FILETE LETE LETE LETE LETE	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	required when	reinstating)			DATE RS AND	DIRECTO Change Change Change	DRS IN 12 e	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI TAMPA FL 3 VP CHRISTOPHI 6202 EMMOI	est ident of templometra OFFICERS AN ER, BRIAN NS LANE 3847 ER, PAULINE Y	gations of, Sec மாக்காட்ர்வுற	DEL	COSO, FTORICE (NOTE FILETE LETE LETE LETE LETE	13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE	ADDRESS ST-ZIP	required when	reinstating)			DATE RS AND	DIRECTO Change Change Change	DRS IN 12 e	

officer or director of the corporation or the receiver or trusted 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 artital injurity with address.