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 #

CITY-ST-ZIP

P96000084012 (9)

PICKN	EY INC.						
Principal Plac	e of Business	Mailing Address			- T TO COMPANY AND FORM OFFIR OUT IN DOUGH DOUGH D	BIGI MULDI MULLI BIBIL OBIBI DIDIR 1101	1081
2890 W BAY DR 1219 S. FT. HARRISON							
BELLEAIR BLUFFS FL 33770 CLEARWATER FL 34616					DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualified	E IN THIS STACE	
					10/08/1996		
	Place of Business	2a. Mailing Address			4. FEI Number	Applied	For
21		26			59-3402910	Not App	licable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 Addition	
22 27 City & State City & State						Fee Require	
23	e	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fee		
Zip	Country	Zip Country			This corporation owes or has p		
24	25 29 30				Personal Property Tax due Jun		
	9. Name and Address of Curren				10. Name and Address of New R		
DŁ	JQUESNAY, GARTH A		81	Name			
1219 S. FT. HARRISON			82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)	
CL	EARWATER FL 34816		83				
			84	City		85 Zip Code	
			1 1	•		FL I I	
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 of 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.							stered lered
SIGNATURE	Signature, typed or printed name of registered age	not and title if equilceble (NOIE-	Registered Agent	t signature require	d when reinstaling)	DATE	
12.	OFFICERS ANI		13.	. ag istora ragaila	ADDITIONS/CHANGES TO OFFI		12
TITLE	VP .	DELETE	1.1 TITLE				Addition
NAME	= · · · · · · · · · · · · · · ·		1.2 NAME				
STREET ADDRESS	2842 DEER HOUND WAY		1.3 STREET ADDRESS				
CITY-ST-ZIP			1.4 CITY - ST-	- ZiP	<u></u>		
TITLE	P	☐ DELETE	2.1 TITLE			Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET A			• ,	
CITY-ST-ZIP	PALM HARBOR FL	DECETE	2. 4 CITY - ST	-ZIP	·	0	Addition
TITLE	S MADTINET INCHE	DELET E	3.1 TITLE			L Change L.	Addition
NAME	MARTINEZ, JACKIE 1530 EVERGREEN AVE		3.2 NAME	Doneso			
STREET ADDRESS	CLEARWATER FL		3.3 STREET A				
CITY-ST-ZIP TITLE	D	☐ DELETE	3.4. CITY - ST 4.1 TITLE	-21r		Change	Addition
NAME	CLANCY, DIANE		4. 2 NAME				
STREET ADDRESS	1000 SAN MARCOS AVE		4.3 STREET A	DORESS			
CITY-ST-ZIP	LARGO FL		4.4 CITY - ST-				
TITLE		DELETE	5.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET A	DDRESS			Ì
CITY-ST-ZIP			5.4 CITY-ST-	- ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				j :
STREET ADDRESS			63 STREET A	DOBESS			

FILED
Mar 03 1998 8:00am
Secretary of State

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 office or director of the corporation or the receiver or fustee 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.