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 # P96000092996 (3)

FILED May 14 1998 8:00am Secretary of State

DAVID	E. BRYANT, CHARTERED				
Principal Plac	ce of Business	Mailing Address			
215 AIRPORT ROAD SOUTH 215 AIRPORT ROAD SOUTH NAPLES FL 34104 NAPLES FL 34104			SOUTH		
				DO NOT WRITE IN THIS	SPACE
 				3. Date Incorporated or Qualified	
2 Principal I	Place of Business	2a. Mailing Address		11/13/1996 4. FEI Number	Applied For
21	or beautions	26		65-0717884	Not Applicable
Suite, Apl. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		8, Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Žip	Country	8. This corporation owes or has paid the co	
24	25 9. Name and Address of Curre	29	30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
		we walleraten whate	81 Name		I ANGUIT
	RYANT, DAVID E				
215 AIRPORT ROAD SOUTH NAPLES FL 34104			82 Stree	t Address (P.O. Box Number is Not Acceptable)	1
l la	4FLEO FL 34 104		83		
			84 City	FI	85 Zip Code
office or agent. I	registered agent, or both, in the Stati am familiar with, and accept the oblig	02 and 607.1508, Florida St te of Florida Such change w gations of, Section 607.0505	atutes, the above-name as authorized by the co , Florida Statutes.	d corporation submits this statement for the purpose rporation's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE	Signature, typed or printed name of registered as	gent and lide if applicable	(NOTE Registered Agent signatu	re required when reinslating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	BRYANT, DAVID E.		1.2 NAME		
STREET ADDRESS	215 AIRPORT RD. S.		1.3 STREET ADDRESS		ុទ្ធ
CITY-ST-ZIP	NAPLES FL		1.4 CiTY-ST-ZIP		Chance Addition S
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME	l _s		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		C) bitti	3.2 NAME	1	ET OHOURS TT MOUNTAIN
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		1
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME	į		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	1		4.4 CITY-ST-ZIP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		}
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	1	Ĭ
STREET ADDRESS			0.0.010557 1000500	1	
			6.3 STREET ADDRESS		

4. 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 suppliemental 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 it changed or en an intrachment with an address.

4 RAJEK QUILLOKA