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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Feb 04 1998 8:00am

Secretary of State

A LEBERROOM HIS LOTTO STILL SOLL CONTRACTOR CONTRACTOR FOR A STILL CHARLES AND CONTRACTOR CONTRACTOR CONTRACTOR

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000094849 (2)

WILLIAMROSS, INC.

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Principal Place of Business Mailing Address												. 10011001 110 10110 61111 00111 56111	2011 QUIQ 1		44	1 (8)) (8))	
3902 HENDERSON BOULEVARD #200 TAMPA FL 33629					3902 HENDERSON BOULEVARD #200 TAMPA FL 33629							DO NOT INO	TE 184 741	U0 0040E			
,												DO NOT WRI	. <b></b>	IS SPACE		<del> </del>	
											3.	Date Incorporated or Qualified	1				
2. Principal P	lace of Busine		2a, Mailing Address								11/15/1996 FEI Number			10	aliant Can		
21					26. Mailing Address							,,,			Applied For Not Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.							59-3414008		60-		dditional	
22											5.	Certificate of Status Desired				quired	
City & State					City & State						6.	Election Campaign Financing	_			May Be	
23					28							Trust Fund Contribution				Fees	
Zip	Country			_	¬ ' <del>  -</del> ¬			Country			8. This corporation owes or has paid the current year Intangible						
24 25 25 26 Name and Address of Current R				9 30						i	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent						
		Current ne	Aistei	ec Agent		B1	Name		10.	Ivame and Address of New I	registere	io Agent					
WEINSTEIN, IRA								٠''	IVAILLE	3							
3902 HENDERSON BOULEVARD #200 TAMPA FL 33629								82	Street	Addres	s (P	O. Box Number is Not Accept	able)				
							ŀ	83									
								84	City				F	<b>L</b>	Zip C		
11. Pursuant office or reagent. I a	to the provision egistered ager m familiar with	ns of Sections 6 nt, or <b>b</b> oth, in th , and accept th	07.0502 and e State of Fl e obligations	1607 orida s of, S	1508, Flor Such cha lection 60	ida Statute inge was a 7.0505. Flo	s, the at uthorized rida Stat	oove d by utes	e-name the co	d corpor rporation	atior n's b	n submits this statement for the poard of directors. I hereby acc	purpose ept the a	∍ of changii ippointmen	ng its it as r	registered egistered	
SIGNATURE					_	,											
BIGNATURE	Signature, typed or	punt <b>ed n</b> ame of regu	tered agent and	little if a	opticable	(NOTE	Registered	Ager	nt signatu	te required	when	reinstating)	DATE				
12.		OFFICE	RS AND DIF	RECT(			13.				A	ADDITIONS/CHANGES TO OF	ICERS A				
₹ITLE	DP				LJ	DELETE	1.1 1(1	LE						∐ Char	nge	Addition	
NAME	ROSSI, ALFONSO				. 1.2 M			MÉ									
STREET ADDRESS	10.00 10.001.00.00				1.3			1.3 STREET ADDRESS									
CITY-ST-ZIP	TAMPA FL					1.4 CI	1.4 CITY-ST-ZIP										
TITLE	DVP					DELETÉ	2.1 TIT	ŧΕ						☐ Char	nge	■ Addition	
NAME		on, Keith R					2.2 NA	ME									
STREET ADDRESS					2.3			2.3 STREET ADDRESS									
CITY-ST-ZIP	TAMPA FL	<u> </u>					2. 4 Cl		I - ZIP	<b></b>							
TITLE	STD					DELETE	3.1 111							☐ Char	ige	☐ Addition	
NAME	Rossi, Ed						3.2 NA	ME									
STREET ADDRESS	13121 TIF						3.3 S1	REET A	ADDRESS								
CITY-ST-ZIP	TAMPA FL	·	<del></del>		<del></del>	CI CYE	3 4, C		T-ZIP	-		<u> </u>					
TITLE						ELETE	41111	LE						L Char	ige	Addition	
NAME							4. 2 NA	ME									
STREET ADDRESS							4.3 ST	REET	ADDRESS								
CITY-ST-ZIP					<del></del>		4.4 CFI		r-zip								
TITLE					ΠD	ELETE	5.1 ît	LE						L] Char	ige	Addition	
NAME							5.2 NA	ME									
STREET ADDRESS							5.3 ST	REET A	address								
CITY-ST-ZIP							5.4 CIT		I - ZIP	1							
TALE					LJ D	ELETÉ	6.1 TIT	LF						L Char	ıge	Addition	
NAME							6.2 NA	M₽									
STREET ADDRESS							6.3 ST	REET	address								

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under ooth; 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.