## 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 # P96000095105 (8)

STUART HOLDINGS, INC.

**FILED** Apr 08 1998 8:00am Secretary of State



Principal Place		Mailing Address		*	( 1637,100) (112,101)	Tarrie BAttir Gålni Aberit Barra si	Jiđi Milhi Iimii Al	JIO+ 0111 1901	
416 FLAMINGO AVENUE STUART EL 34996 416 FLAMINGO AVENUE STUART EL 34996 510ART PL 34996									
STUART EL 34996  OMENO STUART PC 34996					DO NOT WRITE IN THIS SPACE				
	Oc 1				3. Date Incorporated 11/18/1996	or Qualified			
2. Principal Place of Business 2e. Mailing Address					4. FEI Number		Applied For		
21/2400 SE Monterey Rd 26 P.O. BOX					65-0447013			Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of State	tificate of Status Desired		Required	
23 Stuart, FL 28 Stuart, F					6. Election Campaig Trust Fund Contri			• •	
7 2 / 1 Q	Country	701005	Coun	"¿ A	1	owes or has paid the c			
24 544	9. Name and Address of Current		30 (	3/1		Tax due June 30.		∐ No	
					and Di				
416 FLAMINGO AVENUE STUART FL 34996				81 Name TEFFE HAMBER LIN  82 Street Address (P.O. Box Number is Not Acceptable)					
					2400 SE MON		302		
			[8	33			_		
			1	14 City	STRAKT		85 Zip	Code	
44 Dureuant	to the provisions of Sections 607.0500	and 607 1508 Florida Statute	as the she			ement for the purpose		its registered	
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent or both, in the State m familiar with agent incept the obliga	of Florida. Such change was a love of, Section 607.0505, Flo	uthorized rida Statu	by the corporates.	ation's board of directors.	I hereby accept the ar	pointment as	s registered	
SIGNATURE	Signature type or printed kine of regelithed age:	We JEFFK	EY D	. CHAW	USCRUM julied when reinstating)	DATE	70		
12.	OFFICERS AND		13.	Agont signature req		IGES TO OFFICERS AN	ND DIRECTO	RS IN 12	
TITLE	D	DELETE	1.1 T(T)	E			Change	Addition	
HAME	CHAMBERLIN, JEFFREY D		1.2 NAS	AE					
STREET ADDRESS	416 FLAMINGO AVENUE		1.3 STR	EET ADDRESS					
CITY-ST-ZIP	STUART FL 34996			-ST-ZIP				77.729	
TITLE	D Poston, Bryan a Jr.	☐ DELETE	2.1 TITL	· i			L. Change	Addition	
NAME	416 FLAMINGO AVENUE		2.2 NAN						
STREET ADDRESS	STUART FL 34996			EET ADDRESS					
CITY-ST-ZIP TITLE	\$	DELETE	3.1 TITL	Y-ST-ZIP			Change	Addition	
NAME	BAILEY, JAMES C		3.2 NAN						
STREET ADDRESS	418 FLAMINGO AVENUE			EET ADDRESS					
CITY-ST-ZIP	STÚART FL 34998		3.4. CIT	Y-ST-71P					
TITLE		☐ DELETE	4.1 TITL	£			Change	Addition	
NAME			4. 2 NA	ME					
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CITY-ST-ZIP		DELETE		(-ST-ZIP			Change	☐ Addition	
TITLE		☐ DELETE	6.1 TITL	- 1			L Crange	☐ Manifoll	
NAME OTREST LOGGES		-	6.2 NAM	t					
STREET ADDRESS	•			EET ADDRESS					
CITY-ST-ZIP	partify that the information symplical wi	th this filing does not qualify fo		r-ST-ZIP	in Section 110 07/3Vi) Flo	rida Statutos I further	cortifu that th	o information	

r nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatic indicated on this annual report for 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 regeiver 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 advance with an advance. SIGNATURE: