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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## Corporation Name

## **FILED** May 11 1998 8:00am Secretary of State

Principal Place 200 TUMBUN FORT PIERCE	KLING ROAD	Mailing Address 200 TUMBLIN KLING ROAD FORT PIERCE FL 34982		DO NOT WRIT 3. Date Incorporated or Qualified 12/11/1996	E IN THIS SPACE
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 YOO U	inginia Avenue	26 900 VI Rq:	nia Avenue	65-0712887	Not Applicable
Suite, Apt.	e 5	Suite, Apt. #, etc. 27 Suite 5		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	e. A	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip .	Country 782 25 St Luce	Zip	Country St Luci	8. This corporation owes or has p	_ ` _ `
	9. Name and Address of Curren	Registered Agent		10. Name and Address of New R	egistered Agent
WALTERS, MARK 200 TUMBLIN KLING ROAD FORT PIERCE FL 34982  81 Name Unite 25 MARX 25 Street Address (P.O. Box Number is Not Acceptable) 1514 SE CEOQUE 7 St.  83 City Poet St. Lucie FL 85 Zip Code 34983					
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 office or registered agent, or both, in the State of Florida Such change was authorized by 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.  SIGNATURE  Signature, typing to publish harms of registered agent and tilled application.  (NOTE Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	WALTERS, MARK		1.2 NAME	and a second s	<b>-</b>  3
STREET ADDRESS	200 TUMBLIN KLING ROAD FORT PIERCE FL 34982		2	SI4 SE CEOquet S	5 4983
CITY-ST-ZIP	FUNI FIENCE FL 34802	DELETE.		Poet St Lucie Fi	Change Addition
TITLE		L DELCTE	2.1 TITLE		Custings Changer
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		Į.
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STREET ADDRESS			3.3 STREET ADDRESS		)
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
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CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
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NAME			6.2 NAME		
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CITY-ST-ZIP	and the New York of the Control of t	the thirt file or close and a settle of the	6.4 CITY-ST-ZIP	in Castina 140 07/03/3 Florida Da Casa	I further contifu that the last continu
14. INBIBIDY C	ermy mai the imormation supplied with	it it is thing does not quality for	nie exemption stated	in Section 119.07(3)(i), Florida Statutes.	Turiner certily 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 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

SIGNATURE: