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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 05 1998 8:00am Secretary of State

Suite, Apt. #, etc. 27 City & State City & State City & State 28 Country Country Suite, Apt. #, etc. 5. Certificate of Status Desired 6. Election Campaign Financing Free Required \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible
Principal Place of Business 200 DUHMAN STREET TAMPA FL 3300S 2a. Mailing Address POST OFFICE BOX \$208 TAMPA FL 3300S 2b. Mailing Address 2c. Suite, Apl. #, etc. 2c. City & State 2c. City & State 2c. City & State 2c. City & State 2c. Country 2c. P. Country 2c. Country 2c. P. C
Mailing Address 200 NURHAUS STREET TAMPA FL 33005 2. Principal Pisce of Business 2. Mailing Address 2. Principal Pisce of Business 2. Mailing Address 2. Principal Pisce of Business 2. Mailing Address 3. Date Incorporated or Qualified 12/17/1996 2. Principal Pisce of Business 2. Mailing Address 3. Date Incorporated or Qualified 12/17/1996 3. Date Incorporated or Qualified 12/17/1996 3. Date Incorporated or Qualified 12/17/1996 3. Date Incorporation Date of Status Desired 3. Date Incorporation Date Date Desired 3. Date Incorporation Date Date Date Desired 3. Date Incorporation Date Date Date Date Date Date Date Date
200 DURHAM STREET TAMPA FL 33805 2. Principal Place of Business 2. Additional Address 2. Principal Place of Business 3. Date Incorporated or Qualified 12/17/1996 2. Principal Place of Business 2. Additional Address 3. Date Incorporated or Qualified 12/17/1996 2. Principal Place of Business 3. Date Incorporated or Qualified 12/17/1996 2. Principal Place of Business 3. Date Incorporated or Qualified 12/17/1996 3. Date Incorporated or Qualified 12/17/1996 3. Date Incorporated or Qualified 12/17/1996 4. FEI Number 59-3437470 59-34
TAMPA FL 38005 TAMPA FL 38675-5288 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 12/17/1996 2. Principal Piace of Business 2a. Mailing Address 4. FEI Number 4. FEI Number 59-3437470 Not Applied For 59-3437470 Not Applied For 59-3437470 Not Applied For 59-3437470 Not Applied For 79-3437470 Not Appli
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applied State Sta
2. Principal Place of Business
2. Mailing Address 2. Mailing Address 3. Mailing Address 3. Mailing Address 3. Mailing Address 3. Suite, Apt. #, etc. 3. Suite, Apt. #, e
28
Suite, Apt. #, etc. Suite, Apt. #, etc. 27
City & State Country
State City & State
Zip Country Zip Country Zip Country Registered Agent Personal Property Tax due June 30. Yes No No SEPH JR. 2004 DURHAM STREET TAMPA FL 33605 81 Name and Address of New Registered Agent 10. Name and Address of New Registered 10. Name 10
28
CAPITANO, JOSEPH JR. 2004 DURHAM STREET TAMPA FL 33605 81 Name Capitano Joseph JR. 2004 DURHAM STREET TAMPA FL 33605 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 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 agent or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent amenitiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD CAPITANO, JOSEPH JR. STREET ADDRESS CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition Cha
2004 DURHAM STREET TAMPA FL 33805 82 Street Address (P.O. Box Number is Not Acceptable) 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 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 SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PO DELETE 1.1 TITLE CAPITANO, JOSEPH JR. SIRRET ADDRESS CITY-S1-2IP TAMPA FL 33875 1.4 CITY-S1-2IP Change Additio NAME 2.2 NAME STREET ADDRESS CITY-S1-2IP Change Additio Change Additio
TAMPA FL 33605 84 City FL 85 Zip Code 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title of application (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE CAPITANO, JOSEPH JR. SIRRET ADDRESS CITY-ST-ZIP TAMPA FL 33875 DELETE 2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP Change Addition Change Change Change Change Change Change Change Addition Change C
City ### Exposure to the provisions of Soctions 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. ### Signature, typed or printed name of registered agent and take if application (NOTE Registered Agent signature required when reinstating) ### DO
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 agent am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE SIGNATURE Signature, typed or profiled name of registered agent and tried application (NOTE Registered Agent signature required when reinstaling) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD DELETE 1.1 TITLE Change Addition NAME CAPITANO, JOSEPH JR. 1.2 NAME SIRRET ADDRESS CITY-ST-ZIP TAMPA FL 33675 1.4 CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP DELETE 2.1 TITLE Change Addition 1.2 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP DELETE 2.1 TITLE Change Addition 1.4 CITY-ST-ZIP Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP Change Addition 2.3 STREET ADDRESS CITY-ST-ZIP Change Addition 2.4 CITY-ST-ZIP Change Addition 2.5 STREET ADDRESS CITY-ST-ZIP Change Addition 2.5 STREET ADDRESS CITY-ST-ZIP Change Addition 2.6 STREET ADDRESS CITY-ST-ZIP Change Addition 2.7 STREET ADDRESS CITY-ST-ZIP Change Addition 2.8 STREET ADDRESS CITY-ST-ZIP Change Addition 2.9 STREET ADDRESS CITY-ST-ZIP Change Addition 2.1 STREET ADDRESS CITY-ST-ZIP Change Addition Change Change Addition Change Change Change Change Change Chang
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 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 SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE PD CAPITANO, JOSEPH JR. STREET ADDRESS CITY-S1-ZIP TITLE DELETE 2.1 TITLE AMPA FL 33675 DELETE 2.2 NAME STREET ADDRESS CITY-S1-ZIP TITLE DELETE 2.3 STREET ADDRESS CITY-S1-ZIP STREET ADDRESS CITY-S1-ZIP Addition Change Addition Addition Change Addition Addition Addition Change Addition Addition Change Chang
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD CAPITANO, JOSEPH JR. STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP Addition Change Chang
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, typed or printed name of registered Agent and title if application. (NOTE Registered Agent signature required when reinstating). DATE
SIGNATURE Signature, typed or protect name of registered Agent and title diapplication (NOTE Registered Agent signature required when reinstating) DATE
Signature. typed or protect name of registered Agent and title if application 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD CAPITANO, JOSEPH JR. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TAMPA FL 33875 DELETE DELETE DELETE 2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TO BELETE CITY-ST-ZIP TO BELETE CITY-ST-ZIP CHANGE CAPITANO, JOSEPH JR. CHANGE
TITLE PD DELETE 1.1 TITLE Change Addition NAME CAPITANO, JOSEPH JR. 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33875 1.4 CITY-ST-ZIP
NAME CAPITANO, JOSEPH JR. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP L CHTY-ST-ZIP C ADDRESS CITY-ST-ZIP L CHTY-ST-ZIP C ADDRESS CITY-ST-ZIP L CHTY-ST-ZIP L CHANGE L Addition Addition L Change L L C
STREET ADDRESS POST OFFICE BOX 5238
TAMPA FL 33875
TITLE DELETE 2.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP DELETE 2.1 TITLE Change Addition 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
STREET ADDRESS CITY-ST-ZIP 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
CITY-ST-ZIP 2.4 CITY-ST-ZIP
TRILE L_ DELETE ■ 3.1 TITE L Change L Additio
NAME 3.2 NAME 2.2 CIDET ADDRESS
STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP
TITLE DELETE 4.1 TITLE Change Additio
NAME 4.2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-SI-ZIP 44 CITY-SI-ZIP
TITLE DELETE 5.1 TITLE Change Addition
NAME 52 NAME
STREET ADDRESS 5.3 STREET ADDRESS
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition
TITLE DELETE 6.1 TITLE Change Additio
STREET ADDRESS 63 STREET ADDRESS
CITY-SI-ZIP 64 CITY-ST-ZIP
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

receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in lattachment with an address.