## 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 # P96000102835

THEO MANAGEMENT INC.

Principal Place of Business

Mailing Address

## Feb 24 1998 8:00am Secretary of State

2904 OCOEE ST. LEHIGH ACRES, FL. 33972			P.O. BOX 311 LEHIGH ACRES, FL. 33970		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  DECEMBER 18.1996		
2. Principal Place of Business		2a. Mailing Address	26		4. FEI Number Applied F 65 – 0730301 Not Applie		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<del></del>			<b>75</b> Additional ee Required	
City & State		City & State	<b>⊢</b> ′		_		
Zip 4	Country 25	Žip <b>29</b>			B. This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.    Yes   No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
				81 Name			
ANGELA SINKOVITS 1251 TAYLOR LANE EXT. LEHIGH ACRES, FL. 33936			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			83	83			
			84	City	FL   "	Zıp Code	
office or reg	istered agent, or both, in the St	0502 and 607.1508, Florida Statute ate of Florida Such change was a bligations of Section 607.0505. Fig.	authorized by	the corpora	poration submits this statement for the purpose of chang lion's board of directors. I hereby accept the appointmen	ing its registered it as registered	

agent 1 a	am familiar with, and accept the obligations of, Section 607.0505, Flori	ida Statutes.						
SIGNATURE Signature types or printed home of registered agent and take if apolicable (NOTE Registered Agent's greature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	DELETE	1 1 TITLE	PRES., V.P., SEC., TREAS. Change Addition					
NAME		1.2 NAMÉ	THEODORE GAMMEL					
STREET ADDRESS		1.3 STREET ADDRESS	2904 OCOEE ST.					
CiTY+ST-ZIP		1.4 CITY - S1 - ZIP	LEHIGH ACRES, FL. 33972					
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition					
NAME		2.2 NAME						
STREET ADDRESS		2.3 STREET ADDRESS						
CITY - ST - ZIP	<u></u>	2. 4 CITY-ST-ZIP						
TITLE	· DELETE	3.1 TITLE	☐ Change ☐ Addition					
NAME		3.2 NAME T						
STREET ADDRESS		3.3 STREET ADDRESS						
CITY - ST - ZIP		3 4. CITY - ST - ZIP						
TITLE	☐ DELETE	4171716	☐ Change ☐ Addition					
NAME		4 2 NAME						
STREET ADDRESS		4.3 STREET ADDRESS						
CITY - S1 - ZIP		4.4 CITY - ST - ZIP						
TITLE	☐ DELETE	5.1 TITLE	Change Z Addition					
NAME		5.2 NAME	$M_0 \sim 1 \sim 1$					
STREET ADDRESS		5.3 STREET ADDRESS	$\sqrt{(1/2)/29}$					
CITY-ST-ZiP		5.4 CITY-ST-ZIP	1041					
TITLE	☐ DELETE	6.1 TITLE	Change Addition					
NAME.		6.2 NAME	300002439773 Addition -02/25/9801001018					
STREET ADDRESS		6.3 STREET ADDRESS	-02/25/9801001018					
		<b>■</b> }	集集集1500 75					

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 officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, and attachment with an address.

02 20 1998 941-367-7633

CR2E034 (10/97)