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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

| | JAL REPORT 1998 | Secretary Division OF C | of State | Secretary of State |
|---|---|--|---|--|
| 1. Corporation | MENT # P9700(E OF NUTS, INC. | 0001682 (8) | | C CERTIFICATION CONTRACTOR AND CONTR |
| Principal Place of Business 1004 MEADOW CREST DRIVE VALRICO FL 33594 | | Mailing Address 1004 MEADOW CREST DR VALRICO FL 33594 | IVE | DO NOT WRITE IN THIS SPACE |
| · · · · · · | Place of Business | 2a. Mailing Address | | 3. Date Incorporated or Qualified 01/02/1997 4. FEI Number Applied For |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5-9-3429023 Not Applicable \$8,75 Additional |
| 22 | | 27 | | 5. Certificate of Status Desired |
| City & Stat | le | Cily & State | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 g. Name and Address of Curren | | 30 | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent |
| | | | 81 Name | 10. Tautie mile Maniese of their riegisteres vigetic |
| | 04 MEADOW CREST DRIVE | | 82 Street Addre | ess (P,O. Box Number is Not Acceptable) |
| VA | LRIÇO FL 33594 | | 83 | |
| | | | | |
| | | | 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 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 & protein name of registered segret and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | 0 | ☐ DELE TE | 1.1 TITLE | ☐ Change ☐ Addition |
| STREET ADDRESS | PANDOLFO, FRANK 1004 MEADOW CREST DRIVE | <u> </u> | 1,2 NAME | |
| CITY-ST-ZIP | VALRICO FL 33594 | i | 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP | |
| TITLE | | DELETE | 21 TITLE | ☐ Change ☐ Addition |
| NAME | | | 2 2 NAME | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP TITLE | | DELETE | 2. 4 CITY - ST - ZIP 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | • | LLJ VICETE | 3.2 NAME | Change C Addition |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 3.4. CITY+ST-ZIP | |
| TITLE | | DELETE | 4.1 TITLE | Change Addition |
| NAME | | | 4. 2 NAME | |
| STREET ADDRESS City-St-Zip | | | 4.3 STREET ADDRESS : 4.4 City-St-Zip | |
| TITLE | | DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | • | 5.2 NAME | · _ |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | — | 5 4 CITY-ST-7IP | |
| TITLE | | DELETE | 6.1 TITLE |] Change |
| NAME express 40000000 | | | 6.2 NAME | ì |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |

64 CITY-S1-ZIP

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 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 of 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.

FILED

Jan 27 1998 8:00am