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

PROFIT CORPORATION ANNUAL REPORT

1998



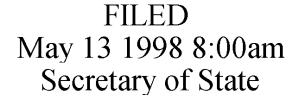
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700003720 (4)

RH BOND & COMPANY, INC.



וטפ חח	AD & COMPANY, INC.				
Principal Place	e of Business	Mailing Address		I HORDINGE HINDE HINDE HINDE HINDE HINDE	
4230 BOUTH MACDILL AVE. TAMPA FL 33611		4230 SOUTH MACDILL AVE. TAMPA FL 33611		DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified	J OI AOL
				01/08/1997	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0738098	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country				Trust Fund Contribution	Added to Fees
Zip 24	├¬ ´	}-·-n	├ ─┐ '	8. This corporation owes or has paid the ci	urrent year Intangible
24)	25 Name and Address of Current	29 Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	
81 Name 0					
LOVELACE, WILLIAM K ESQ.				ROBERT BOND	
2310 WEST BAY DRIVE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
LARGO FL 33770			83	SU S. MACHIEL MV.	
			84 City	MPA FI	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 have a profiled name of each reciage of and talled appointment. (NOTE Registered Agent signature required when required w					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
THLE	D	DELETE	1.1 TITLE		Change Addition
NAME	BOND, ROBERT H		1.2 NAME		
STREET ADDRESS	4230 SOUTH MACDILL AVE.		1.3 STREET ADDRESS		ļ
CITY-ST-ZIP	TAMPA FL 33611		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2 2 ŅAME		
STREET ADDRESS			2.3 STREET ADDRESS		i
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - ZIP		Change Addition
TITLE NAME		בן טבונונ	4.1 TITLE 4.2 NAME		Change Changing
1 }			3		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME		LL VELCIE	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		F	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		
			0.5 OHT 01-18		

14. Thereby 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 information indicated on this annual report or suppliemental 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 frustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter (i.e. p. an attachment with an address.)

Rough // Rows

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