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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Apr 23 1998 8:00am

Secretary of State

4/10/18 (8/2)832-4446

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000006786 (2)

Principal Place of Business ### A FL 33615 #	
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Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Zip Country Zip Country Zip Country Zip SpeiGHT, DAVID 8007 FERN VIEW LANE TAMPA FL 33815 Sections 607 0502 and 607 1508, Florida Statutes, the above-named concombined or registered agent, or both, in the State of Henda. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SpeiGHT, DAVID SP	DO NOT WRITE IN THIS SPACE
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State 28 Zip	3. Date Incorporated or Qualified
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State 28 Zip	01/17/1997
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State 28 Zip	7. El Number Applied F
City & State Zip City & State Zip Country Zip SPEIGHT, DAVID 8007 FERN VIEW LANE TAMPA FL 33815 82 Street Add Real City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named correction of the corporal agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent of the diagnostics RICHARD Signature, typed or prefer have a sequenced agent age	59-3430829 Not Applie
City & State Zip	5. Certificate of Status Desired S8.75 Addition
Zip Country 29 30 30 30 30 30 30 30 30 30 30 30 30 30	Fee Required
Zip Country 25	6. Election Campaign Financing \$5.00 May Bo
9. Name and Address of Current Registered Agent SPEIGHT, DAVID 8007 FERN VIEW LANE TAMPA FL 33615 82 Street Add 83 B4 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corroffice or registered agent, or both, in the State of Honda. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules. IGNATURE Signature, spired or present name of registered agent and filled spireciple. OFFICERS AND DIFFICTORS 13. TIE P	Trust Fund Contribution
SPEIGHT, DAVID 8007 FERN VIEW LANE TAMPA FL 33615 81 Name 82 Street Add 83 B4 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corrolfice or registered agent, or both, in the State of Horida. Such change was authorized by the corpora agent. Iram familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corrolfice or registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corrolfice or registered agent agent and filled agenciate. IGNATURE Signature rysed or predict name of registered agent and filled agenciate. OFFICE RS AND DIRECTORS 13. THE PURE SPEIGHT, DAVID 12 NAME 1.3 SIREET ADDRESS 11.3 SIREET ADDRESS 12.1 TITLE 12.1 TITLE 12.2 NAME 1.2 SIREET ADDRESS 12.2 SIREET ADDRESS 12.3 SIREET ADDRESS 12.4 CITY-SI-ZIP 13.1 TITLE 14.1 TITLE 15.1 TITLE 15.1 TITLE 16.1 TITLE 17.1 TITLE 18.1 TITLE 18.1 TITLE 19.1 TITLE 19.	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
SPEIGHT, DAVID 8007 FERN VIEW LANE TAMPA FL 33815 82 Street Add 83 B4 City I. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corroffice or registered agent, or both, in the State of Horica. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. GNATURE Signature, typed or protein hame of registered agend and tilled approaches. OFFICERS AND DIRECTORS 13. LE P SPEIGHT, DAVID 12 NAME 8007 FERN VIEW LANE 1.3 SIREET ADDRESS Y-ST-2P LE ME REST ADDRESS TAMPA FL 33615 LE DELETE 1.1 TITLE 22 NAME 22 STREET ADDRESS Y-ST-2P LE DELETE 3.1 TITLE 22 NAME 3.2 STREET ADDRESS Y-ST-2P LE ME REST ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP LE ME REST ADDRESS Y-ST-ZIP LE ME REST ADDRESS Y-ST-ZIP LE ME REST ADDRESS Y-ST-ZIP LE ME REST ADDRESS STREET ADRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADRESS S	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
B2 Street Add R3 Street Add R3 R4 City Fursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corroffice or registered agent, or both, in the State of Horida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. RNATURE Signature, spied or printed name or registered agend and tile displacative. OFFICERS AND DIRECTORS 13. LE P SPEIGHT, DAVID RESTADDRESS 44.CITY-S1-ZIP LE ME RESTADDRESS Y-ST-ZIP LE RESTADDRESS Y-ST-ZIP RESTADDR	
TAMPA FL 33615 B3	(0.0. 0)
REET ADDRESS PY-ST-ZIP REET A	ess (P.O. Box Number is Not Acceptable)
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I. Pursuant to the provisions of Sections 607.0602 and 607.1508. Florida Statutes, the above-named corrodice or registered agent, or both, in the State of Honda. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. IGNATURE Signature, typed or product name of registered agend and title displacable. (NOTE Registered Agent signature reports)	7:- O.d.
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporal agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules. IGNATURE	FL 85 Zip Code
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