## 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 # P97000007051 (0)

ELIZABETH A. FIX, P.A.

## **FILED** May 15 1998 8:00am Secretary of State



| Principal Place                          | e of Business   | Mailing Address  |   |                                   |   |
|--|---|--|---|-----------------------------------|---|
| 3410 TRIS ST N<br>ST PETERSBURG FL 33704 |   | 3410 IRIS ST N<br>ST PETERSBURG FL 33704   |   |                                   | DO NOT WRITE IN THIS SPACE  |
|  |   |  |   |                                   | 3. Date Incorporated or Qualified   |
|  |   |  | ٨   |                                   | 01/24/1997  |
| 2. Principal P                           | lace of Business  | 2a. Mailing Address,   |   |                                   | 4. FEI Number Applied For   |
| 21                                       |   | 26 8601-4232.NI  |   |                                   | 65-0709153 Not Applicable   |
| Suite, Apt.                              | #, etc.   | Suite, Apt. #, etc.  |   |                                   | 5. Certificate of Status Desired S8.75 Additional   |
| 22                                       |   | 27 Ste 100   |   |                                   | Fee Required  |
| City & State                             | 9   | City & State)  |   |                                   | 6. Election Campaign Financing \$5.00 May Be  |
| 23                                       |   | 28 32 /EZ  | ER Sour   | 1-2                               | Trust Fund Contribution Added to Fees   |
| Zip                                      | Country   | Zin  | Cong  | fry                               | 8. This corporation owes or has paid the current year Intangible  |
| 24                                       | 25  | 29 33702   | 30]   |                                   | Personal Property Tax due June 30. Yes X-No   |
| ļ <u>.</u>                               | 9. Name and Address of Currer   | nt Registered Agent  |   | Name                              | 10. Name and Address of New Registered Agent  |
|  | , euzabeth a  |  |   | Name                              |   |
| 3410 IRIS ST N                           |   |  |   | Street Ac                         | dress (P.Q. flox Number is Not Acceptable)  |
| ST PETERSBURG FL 33704                   |   |  |   | 860                               | 1. 4º 3L/V,   |
|  |   |  | *   | 33 5%                             | 100   |
|  |   |  | 8   | 34 City                           | (A)   85 Zip Code   |
|  |   |  |   | <u></u>                           | , TELERS SURG. FL XX102   |
| 11. Pursuant office or re<br>agent. La   | to the provisions of Soctions 607.050<br>egistered agent, or both, in the Stato<br>m familiar with, arid accept the oblig | 02 and 607.1508, Florida<br>of Florida. Such change<br>ations of, Section 607.05 | Statutes, the abo<br>was authorized<br>05, Florida Statul | ove-named or<br>by the corportes. | orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered |
| SIGNATURE                                |   |  |   |                                   | ι   |
|  | Signature, typed or priction name of registered ag-   | <del></del>  |   | Agent signature ren               | quired when reinstating) DATE   |
| 12.                                      |   | D DIRECTORS  | 13.   | ·                                 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |
| TITLE '                                  | 0   | ☐ DELE   |   |                                   | Change  Addition  |
| NAME                                     | FIX, ELIZABETH A  |  | 1.2 NAM   | ·   _                             | 01.1 11 # 24 a) 1t 100  |
| STREET ADDRESS                           | 3410 IRIS ST N  |  | 1.3 STR   | EET ADDRESS                       | 8601- 4 = St. N. St. 100<br>St. Peters Burg F133702   |
| CITY-ST-ZIP                              | ST PETERSBURG FL 33704  | - Cont   |   |                                   |   |
| TITLE                                    |   | DELE   | •                   |                                   | Change Addition   |
| NAME                                     |   |  | 2.2 NAM   | E                                 |   |
| STREET ADDRESS                           |   |  | 2.3 STRE  | EET ADDRESS                       |   |
| CITY-ST-ZIP                              |   |  |   | Y-ST-ZIP                          |   |
| TITLE                                    |   | ☐ DELE   | ,   |                                   | Change L Addition   |
| NAME                                     |   |  | 3.2 NAM   | E                                 |   |
| STREET ADDRESS                           |   |  | 3.3 STRI  | EE1 ADDRESS                       |   |
| CITY-ST-ZIP                              |   |  |   | Y-ST-ZIP                          |   |
| TITLE                                    |   | DELET  | ,,,   |                                   | Change Addition   |
| NAME                                     |   |  | 4, 2 NAM  | AE                                |   |
| STREET ADDRESS                           |   |  | 4.9 STRI  | EET ADDRESS                       | •   |
| CITY-ST-ZIP                              |   |  |   | -ST-ZIP                           |   |
| TITLE                                    |   | ☐ DELE   |   |                                   | ☐ Change ☐ Addition   |
| NAME                                     |   |  | 5.2 NAM   | E                                 |   |
| STREET ADDRESS                           |   |  | 5.3 STRI  | EET ADDRESS                       |   |
| CITY-ST-ZIP                              |   | .·   |   | - ST-ZIP                          |   |
| ŦITLE                                    |   | ☐ DELE   | TE 6.1 TITU   | <u> </u>                          | ☐ Change ☐ Addition   |
| NAME                                     |   |  | 6.2 NAM   | .E                                |   |
| STREET ADDRESS                           |   |  | 6.3 STRE  | EFT ADDRESS                       |   |
| CITY-ST-ZIP                              |   |  | 6.4 DITY  | -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 or 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 changes of on an attachment with an exercise.