## 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** 

P97000008373 (7) DOCUMENT #

MR. CUBBY ENTERPRISES, INC.

Principal Place of Business

Mailing Address

601 EAST ROSERY ROAD STE 3802

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**FILED** Feb 20 1998 8:00am Secretary of State



**LARGO FL 33770 LARGO FL 33770** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1997 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 59-3423050 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TOWNES. HORTON 601 EAST ROSERY ROAD STE 3802 82 Street Address (P.O. Box Number is Not Acceptable) LARGO FL 33770 83 84 City 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE \_\_ DELE**te** 1.1 TITLE Change Addition NAME SCHWARTZ, BARBARA 1.2 NAME 601 EAST ROSERY ROAD STE 3802 STREET ADDRESS 1.3 STREET ADDRESS **LARGO FL 33771** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITI F 2.1 TITLE Change Addition **TOWNES, HORTON** NAME 2.2 NAME 435 16TH AVENUE SE STE 553 STREET ADDRESS 2.3 STREET ADDRESS **LARGO FL 33771** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME MILLER, CLARICE 3.2 NAME **SFA PO BOX 6212** STREET ADDRESS 3.3 STREET ADDRESS NACOGDOCHES TX 75982 CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change 5.1 TETLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-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 changed, or on an attachment with an address