## 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 # P9700009083 (1)

FRANK'S INTERNATIONAL MISSION CENTER, INC.

Principal Place of Business		Mailing Address		
		1318 LAFAYETTE STREET		
CAPE CORAL FL 33904		CAPE CORAL FL 33904		DO NOT WRITE IN THIS SPACE
ļ				3. Date Incorporated or Qualified
				01/29/1997
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0784836 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22		27		Fee Required
City & State		City & State		6, Election Campaign Financing \$5.00 May Be
23	Country	28	Country	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No
24	25 Name and Address of Curre	29 3	01	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
81 Name				
-AMERILAWYER OHARTERED			7 /4	OMAS W. HILL
CORAL GARLES FL 32124			82 Street Addre	ess (P.O. Box Number is Not Acceptable)
0000			83	
			24 60	[Gel 7 0 ]
84 City APE				E CORAL FL 85 3 3904
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 registere				
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	Theresails!	Hell		4-7-98
	Signature, wheel or printed name of registered a		Registered Agent signature require	
12.	OFFICERS A	ND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE	FRANK, EWALD	C) Detere	1.1 TITLE	Clade D vacition
NAME	· · · · · · · · · · · · · · · · · · ·		1.2 NAME	
STREET ADDRESS	1318 LAFAYETTE STREET CAPE CORAL FL 33904		1.3 STREET ADORESS	
CITY-ST-ZIP TITLE	STD	DELETE	1.4 City-St-ZiP 2.1 Title	Change   Addition
NAME	HILL. THOMAS W	_ office	2.2 NAME	E diality E housing
STREET ADDRESS	1318 LAFAYETTE STREET		2.3 STREET ADDRESS	
CITY-S1-ZIP	CAPE CORAL FL 33904		2. 4 CITY-ST-ZIP	
TITLE	0/4 2 00/42 1 2 00004	☐ DELETE	3.1 TITLE	Change Addition
NAME		<del>-</del>	3.2 NAME	_ , _
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			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	

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 arrural 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, or on an attachment with an address.

5.4 CITY - ST - ZIF

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

una W Hill

4/7/98

549-2444

**FILED** 

Apr 14 1998 8:00am

Secretary of State