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 #

P97000009747 (1)

Principal Place of Business	Mailing Address				
10720 PALMETTO ST RIVERVIEW FL 33569	10720 PALMETTO ST RIVERVIEW FL 33569				
-					

FILED Feb 20 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address				na Address						
RIVERVIEW F					D PALMETTO ST RVIEW FL 33569					
										DO NOT WRITE IN THIS SPACE
İ	-									3. Date Incorporated or Qualified
2. Principal f	Place of Busi	ness		2a M	ailing Address					01/27/1997 4. FEI Number Applied For
21				26	g					4, FEI Number Applied For Not Applicable
Suite, Apt.	. #, etc.			 	ite, Apt. #, etc.					SS 75 Additional
22				27						5. Certificate of Status Desired Fee Required
City & Star	te			Cit	ty & State					8. Election Campaign Financing \$5.00 May Be
23				28						Trust Fund Contribution Added to Fees
Zip		Country	1		Zip Country			'		8. This corporation owes or has paid the current year Intangible
24	A Name	25	ss of Current	29	ad Amont	30				Personal Property Tax due June 30. X Yes No
<u> </u>			38 OI CUITOIIL	LIABIRIALE	A Agent		81	Name		10. Name and Address of New Registered Agent
	ARLTON, AL							Marilo		
	720 PALME						82	Street	Addres	ss (P.O. Box Number is Not Acceptable)
""	VERVIEW F	. 33309					83	<u></u>		
							84	City		FL 85 Zip Code
11. Pursuant	to the provis	ions of Secti	ons 607 0502	and 607.1	508, Florida Statu	ites, the a	bove	e-named	corpo	ration submits this statement for the purpose of changing its registered in's board of directors. I hereby accept the appointment as registered
office or (regi ste red ag am f am iliar w	jent, or both, ith, and acco	, in the State o ept the obligat	f Florida. (ons of, Se	Such change was ection 607.05 0 5, F	authorize Iorida Sta	ed by itutes	/ the cor s.	poratio	n's board of directors. I hereby accept the appointment as registered
SIGNATURE		,		, -						
Old Williams	Signature, lyned		of registered agent			TE: Registere	d Age	nt signature	required	when reinstating) DATE
12.	Α		FICERS AND	DIRECTO		13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Presi	dent			DELETE	1.1 T				☐ Change ☐ Addition
NAME	المساوو	س . هم	urlton metto:	. .		1.2 N				•
STREET ADDRESS						1		ADDRESS		
CITY-ST-ZIP TITLE	Vice	Presid	F1a. 3	9.356	Y □ DELETE	1.4 C 2.1 Ti	ITY-S	T-ZIP		Change Addition
	John				begen	2.7 H				Change L. Addition
STREET ADDRESS	10226	Pala	etto 51					ADDRESS	1	
			Fla, 3		C)			AUUNESS ST-ZIP		
TITLE	Sec re		Treasu		DELETE	3.1 1		11-215	 -	Change Addition
NAME			uehan	<i>n</i>		3.2 N				
STREET ADDRESS	10720	Pali	netto =	\$F.		3.3 8	TREET	ADDRESS		
CITY-ST-ZIP	River			335	69		ity-s			
TITLE	1111		 		DELETE	4.1 Ti				Change Addition
NAME						4.2 N	IAME			
STREET ADDRESS						4.3 S	TREET	ADDRESS		
CITY-ST-ZIP						4.4 D	TY-S	T-ZIP		
TITLE					DELETE	5.1 ¥	TLE			Change Addition
NAME						5.2 N	ame			
STREET ADDRESS						5.3 ST	TREET.	ADDRESS		
CITY-ST-ZIP							ITY - ST	T-ZIP		
TITLE					DELETE	6.1 TI				☐ Change ☐ Addition
NAME						6.2 N/				
STREET ADDRESS								ADDRESS		
CITY-ST-ZIP						6.4 CI	TY-SI	[• 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.