FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of States

DIVISION OF CORPORATIONS

DOCUMENT # P97000010901 (1)

FRS ENTERPRISES, INC.

FILED
Apr 07 1998 8:00am
Secretary of State

REPORTAGE DES ASSISTANTAS ASSI

Principal Place of Business Mailing Address				, reanisen ine reini senti entit kaiti kaliti ncini natit natit selli ncini liki
9826 THOMAS DR PANAMA CITY BEACH FL 32407		9826 THOMAS DR PANAMA CITY BEACH FL 32407		
THE STATE OF THE S		TAIRMIN OFFI DENOTE IE SEND!		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
2. Principal 6	Place of Business	2a. Mailing Address		01/31/1997 4. FEI Number Applied For
21		26		, pp.ned / s.
Suite, Apt. #, etc		Suite, Apt. #, etc.		— \$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	28 	Country	Trust Fund Contribution Added to Fees
24	25	<u> </u>	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent
SAMUELS, CYNTHIA			81 Name	Flem Houston
7121 W HWY 98			82 Street Add	dress (P.O. Box Number is Not Acceptable)
PANAM CITY BEACH FL 32407			93	000
			[-1]	9826 Thomas Dr. Bussies and
			B4 City Pa	name CiN Beach FI 85 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 a	an familiar with, and accept the oblig	ror Honda. Such change was a ations of, Section 607.0595, Flo	utriorized by the corpora rida Statutes.	
SIGNATURE - Ilea W. South				3/20/98
12.	Signature, typied or printed name of registered ap OFT ICERS AN	D DIRECTORS (NOTE	Registered Agent signature requirements 13.	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	SA TOTAL	DELETE		
NAME			1.2 NAME	Change Change Change Change Change Co. Box 9100-(103 cindy hanc) Panama City Beach, 72 32417 Panama City Beach, 72 32417 Panama City Beach, 72 32417 Change Cha
STREET ADDRESS			1.3 STREET ADDRESS P.	0. Box 9106-(103 cindy LANC)
CITY-ST-ZIP			1.4 CITY-ST-ZIP	Panama CN Beach, 92 32417
TITLE		DELETE	2.1 TITLE 1	P Change X Addition
NAME			2.2 NAME R	becca Houston (Residence)
STREET ADDRESS			2.3 STREET ADDRESS P	0. Box 9106 - (103 CINAY KANC)
CITY-ST-ZIP			2 4 CITY-ST-ZIP	mana City Kach, 12 32117
₹ITLE		☐ DELETE	3 1 TITLE	☐ Change ☐ Addition
NAME			3 2 NAME	
STREET ADDRESS	1		3 3 STREET ADDRESS	
CffY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELF TE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	1
STREET ADDRESS			4 3 STREET ADDRESS	
CITY+ST-ZIP		Determ	4.4 CITY-ST-ZIP	About Table
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition

14. Thereby 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 supplience and indicated on this 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

fi 2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

NAME

Ilom W. Sound

DELETE

3.20-98

850-236-0485