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 # P97000019254 (6)

F. PIERCE ENTERPRISES, INC.

FILED Jan 22 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address		ı impirmat sib rokki pakir batır obiki dakir obiko ilibin dirin dibir dibir
4301 ONDICH ROAD APOPKA FL 32712		4301 ONDICH ROAD APOPKA FL 32712			
					DO MOT MIDITE IN THIS OR LOS
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
					·
2. Principal P	Place of Business	2a. Mailing Address			02/27/1997 4. FEI Number
21		26			59-3428664 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			SR 75 Additional
22		27	27		5. Certificate of Status Desired Fee Regulred
City & State		City & State			8. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Zip Country		8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. Yes No
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
PIEROE, FRANCES				1 Name	
43	01 ONDICH ROAD		6:	2 Street Add	ress (P.O. Box Number is Not Acceptable)
AP	OPKA FL 32712		L		
			8	3	
			84	\$ City	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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature typed or printed name of registered a	contend the foresteephin (NOTE	Classica A		red when reinstating) DATE
12.		ND DIRECTORS	13.	gent signature regor	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PIERCE, FRANCES		1.2 NAME		_ , _
STREET ADDRESS	4301 ONDICH ROAD		1.3 STREE	T ADDRESS	
CITY-ST-ZIP	APOPKA FL 32712		1.4 CITY-	ST-ZIP	
TITLE	STD DEL		2.1 TITLE		☐ Change ☐ Addition
NAME	PIERCE, FRANCES		2.2 NAME]	-
STREET ADDRESS	4301 ONDICH ROAD		2.3 STREE	T ADDRESS	
CITY-ST-ZIP	APOPKA FL 32712		2. 4 CITY	-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	T ADDRESS	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	
TITLE	DELETE 4.1 TO		4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREE	T ADDRESS	
CITY-ST-ZIP			5.4 CITY-		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			1	T ADDRESS	
CITY-ST-ZIP			6.4 CITY	- 1	

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.

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