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

PROFIT CORPORATION

SIGNATURE:

FILED FLORIDA DEPARTMENT OF STATE Feb 09 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS

DOCU 1. Corporation JAXBO	· ·	025915 (4)				
Principal Place	ce of Business	Mailing Address				
41 N FT HARRISON AVE 41 N FT HARRISON AVE						
CLEARWATER FL 34615 CLEARWATER FL 34615						
					DO NOT WRITE IN THE	S SPACE
					3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address			03/17/1997 4. FEI Number - 3	Applied For
21 6721-6731 Stuart Ave 26		26	6		APPLIED FOR	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		27		5. Certificate of Status Desired	Fee Required	
📆 ´ : . 		City & State			6. Election Campaign Financing	_\$5.00 May Be
Zip	sonville Fl. Country	Zîp	Country		Trust Fund Contribution 8. This corporation owes or has paid the contribution	Added to Fees
24 3225	25	29	30	1	Personal Property Tax due June 30.	ument year intangible ☐ Yes ☐ No.
~~~~	g. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent
BONNER, HEIKO 81 Name						
	N FT HARRISON AVE		82	Street Addre	ss (P.O. Box Number is Not Acceptable)	
CLI	EARWATER FL 34615		83			
						i
			84	City	F	85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligation	and 607.1508, Florida Statute Florida. Such change was a ons of, Section 607.0505, Flo	es, the above-reathorized by the orida Statutes.	named corpo he corporatio	ration submits this statement for the purpose n's board of directors. I hereby accept the a	of changing its registered opointment as registered
	Signature, typed or printed name of registered agent		. Registered Agent	signature required		
12.	OFFICERS AND	DELETE DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AT	
NAME	VP	- otterit	1.2 NAME			☐ Change ☐ Addition
STREET ADDRESS	Arndt Oelkers Waeldele Street	16	1.3 STREET AD	DRESS		
CITY-ST-ZIP	- Waeldele Street - Hirschegg - Germ		1.4 CITY-ST-ZIP			
TITLE	-11-11-5C11-CG-G	DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME			2.2 NAME			
Street address		2.3		DRESS		
CITY-ST-ZIP			2. 4 CITY - ST - 2	ZIP		
TITLE NAME	<b>I</b>		3.1 TITLE 3.2 NAME			☐ Change ☐ Addition
STREET ADDRESS			3.3 STREET ADI	UBESS		ļ
CITY-ST-ZIP	1		3.4. CITY-ST-7	ſ		
TITLE	DELETE		4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADD	DRESS		
CITY-ST-ZIP	4.4 CITY - ST- Z		IP .			
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME			
CITY-ST-ZIP			5.3 STREET ADD			
TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADD	DRESS		
CITY-ST-ZIP			6.4 CITY-ST-2	P L		
14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual poort is true and accurate and that my signature shall have the provided in the supplemental annual poort is true and accurate and that my signature shall have the provided in the pr						

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CLEARWATER, FL 34615 (/23 % (813) 464-9900