

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000026972 (4)

1. Corporation Name
PETERS, INC.

Principal Place of Business 100 SECOND AVENUE South SUITE 102 ST. PETERSBURG FL 33701	Mailing Address 100 SECOND AVENUE South SUITE 102 ST. PETERSBURG FL 33701
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 100 2nd Ave So #102 Suite, Apt. #, etc. 22 102 City & State 23 St. Petersburg, Florida Zip 24 33701		2a. Mailing Address 26 100 2nd Ave So #102 Suite, Apt. #, etc. 27 102 City & State 28 St. Petersburg, Florida Zip 29 33701		3. Date Incorporated or Qualified 03/14/1997	
2. Principal Place of Business 21 100 2nd Ave So #102 Suite, Apt. #, etc. 22 102 City & State 23 St. Petersburg, Florida Zip 24 33701		2a. Mailing Address 26 100 2nd Ave So #102 Suite, Apt. #, etc. 27 102 City & State 28 St. Petersburg, Florida Zip 29 33701		4. FEI Number 59-3432176 Applied For Not Applicable	
2. Principal Place of Business 21 100 2nd Ave So #102 Suite, Apt. #, etc. 22 102 City & State 23 St. Petersburg, Florida Zip 24 33701		2a. Mailing Address 26 100 2nd Ave So #102 Suite, Apt. #, etc. 27 102 City & State 28 St. Petersburg, Florida Zip 29 33701		5. Certificate of Status Desired No \$8.75 Additional Fee Required	
2. Principal Place of Business 21 100 2nd Ave So #102 Suite, Apt. #, etc. 22 102 City & State 23 St. Petersburg, Florida Zip 24 33701		2a. Mailing Address 26 100 2nd Ave So #102 Suite, Apt. #, etc. 27 102 City & State 28 St. Petersburg, Florida Zip 29 33701		6. Election Campaign Financing Trust Fund Contribution No \$5.00 May Be Added to Fees	
2. Principal Place of Business 21 100 2nd Ave So #102 Suite, Apt. #, etc. 22 102 City & State 23 St. Petersburg, Florida Zip 24 33701		2a. Mailing Address 26 100 2nd Ave So #102 Suite, Apt. #, etc. 27 102 City & State 28 St. Petersburg, Florida Zip 29 33701		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	

9. Name and Address of Current Registered Agent PACZKOWSKI, JANET L 100 SECOND AVENUE SUITE 102 ST. PETERSBURG FL 33701		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 Janet L. Paczkowski (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Janet L. Paczkowski 3/19/98 813-823-3301

CR2E034 (10/97)