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

CORPORATION

FILED Jan 29 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

,			y of State ORPORATIONS		Secretary of State				
1. Corporation	77100110	9700002 ANCHISE CORPO	` ')	 10 68 10 	L 1880 i 1101) 108	
Principal Place	e of Business	Ma	iting Address			i eduineal seu susei eari	1 MP 121 MM 111 BM 110 51\$11	: (90E)	19 181 1451
12384 88TH AVENUE NORTH 12384 88TH AVENUE NORTH									
SEMINOLE FI	_ 33772	SE	EMINOLE FL 33772			DO NOT	WRITE IN THIS S	SPACE	
1						3. Date Incorporated or Qu	alified		
						03/21/1997			
	lace of Business) _	Mailing Address			4. FEI Number			plied For
21	# -1-	26	G-94- A-1 # -1-			59-3440664			t Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desi	red 🗌	\$8.75 A	
City & State			City & State			6. Election Campaign Finar	ncina	\$5.00	
23		28	•		-	Trust Fund Contribution		Added 1	
Zip	Count	ry	Zip	Count	ry	8. This corporation owes or	has paid the curr	rent year Int	angible
24	25	29		30		Personal Property Tax do			No
100		ess of Current Regist	zred Agent	8	1 Name	10. Name and Address of I	vew Hegistered A	Agent	
KNOWLION, HOHACE A IV						WLAN E. FOUSE			
4 442 WEST KENNEDY BOULEVARD 82 Street SUITE 280						dress (P.O. Box Number is Not A 384 88 B AVE. N.	cceptable)		
TAMPA FL 33606					3				
•						MINOLE			
				8	4 City 7	V.	FL	85 Zip (272
11. Pursuant	to the provisions of Sec	tions 607,0502 and 60	7.1508, Florida Statut	es, the abo	ve-named cor	poration submits this statement f		changing it	s registered
office or r agent, I a	egistered agent, or bot m familiar with, and ac	h, in the State of Florida cept the obligations of,	 Such change was a Section 607.0505, Fit 	authorized i orida Statut	by the corpora es.	poration submits this statement fation's board of directors. I hereb	y accept the app	ointment as	registered
SIGNATURE		E. FOUSE		Bew	lah E	Fousi		15/98	
40	Signature, typed or printed nen	ne of registered agent and title it OFFICERS AND DIREC			gent signature requ	ulred when reinstating)	DATE	- DISEOTOD	0.111.40
12.	<u> </u>	DEFICERS AND DIREC	DELETE	13.	 	ADDITIONS/CHANGES TO	J OFFICERS AND	Change	Addition
NAME	FOUSE, BEULAH	I F		1,2 NAM	}			2 0go	
STREET ADDRESS				- 7	- 1				
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TITLE		11/2		1.4 CITY					
	ı D	3172	☐ DELETE		-ST-ZIP		 :	Change	Addition
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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 13 if changed, or on an attachment with an address.