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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027237 (1)

FILED Mar 09 1998 8:00am Secretary of State

1.	B+IOLC	DING INVESTMENT INC.		(, ,									
Pr	incipal Place	e of Business	Mailing	Address					1 1881/169/1 168 786/1 788/1 88/1/1 88/1/1 68/1/1 4	harra fhair	I GĀŅO (KOŅO II)	11 1 44 1 1441	
2404 LEAFDALE CIRCLE SOUTH 2404 LEAFDALE CIRCLE SO JACKSONVILLE FL 32218 JACKSONVILLE FL 32218						HTUC			DO NOT WRITE IN	THIS SE	PACE		
									3. Date Incorporated or Qualified	11100			7
									03/21/1997				l
2.	Principal Pl	lace of Business	2a. Ma	ting Address					4. FEI Number		Ap	plied For	1
21				26					59-3434387			t Applicable	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.					Certificate of Status Desired	ב	\$8.75		١
22	City & State			City & State							Fee Re	·	-
23	City & State	e	<u> </u>	28					6. Election Campaign Financing Trust Fund Contribution	٦	\$5.00 Added t		ļ
20	Žip	Country	- 	Zip Cour					This corporation owes or has paid to				1
24	, 	25 29 30							Personal Property Tax due June 30. Yes No				
		9. Name and Address of Current	Registere	d Agent		81			10. Name and Address of New Regis	tered A	gent]
MATTHEWS, LAMAR T							Name						
	24			82	Street	Addres	address (P.O. Box Number is Not Acceptable)			··	1		
	JA	CKSONVILLE FL 32218				83							-
						63							1
						84	City			FL	85 Zip (ode	1
11	. Pursuant i	to the provisions of Sections 607 0502	and 607.1	508. Florida Statute	s the a	bove	a-named	corpo	ration submits this statement for the nurr		hanging its	s registered	┨
	office or re	egistered agent, or both, in the State o	Florida S	Such change was a	uthorize	d by	the corp	poratio	ration submits this statement for the purposes of directors. I hereby accept the	ne appo	ntment as	registered	1
		in miration with and accept the titliness	ons or, se	Ction 601.0303, 110	ilua sia	10(68							
5	GNATURE	Signature, typod or printed name of registered pent			Registere	d Age	nt signature	e required		DATE			٦
1		OFFICERS AND	DIRECTO		13.			,	ADDITIONS/CHANGES TO OFFICER				8
	LE	D - PRはSIのロルア BEECKLER, THOMAS F		DELETE	1.1 10	_		D	. V. P	ι	Change	Addition	
	ME	9428 BAYMEADOWS ROAD, S	111TE 112	•	1.2 N			26	TRECIA BAKER 104 LEAF DALE CRI	۲.			133
1	REET ADDRESS TY-ST-ZIP	JACKSONVILLE FL 32256	O.I.C 1.12	•		ineei ITY-S	ADDRESS		DX, 156, 32218	•			IZ III
	LE	D		X DELETE	21 T		1-212	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	111-6133216		Change	Addition	뚱
ľ	ME .	BEAVERS, BOBBY L			2.2 N			(ĺ
ST	REET ADDRESS	1350 TRADEPORT DRIVE, SUI	TE 101		2.3 \$	TREET	ADDRESS	•	-	. 1			
CF	TY-ST-ZIP	JACKSONVILLE FL 32218			2.40	OTY-S	ST - 21P						
Til	ILE	D - SEC. TREAS	~=	DECETE	3.1 T	ITLE		Γ		<u>1</u>	Change	Addition	7
1	IME	MATTHEWS, LAMAR T			3.2 N	AME							
	REET ADDRESS	2404 LEAFDALE CIRCLE SOU	iH		4		address						Ì
_	TY-ST-ZIP	JACKSONVILLE FL 32218		DELETE ,			ST-ZIP	├			Change	Addition	-
	ILE UME	D. V.P. GELEMA BETT. JACK				4.1 TITLE 4. 2 NAME				ı	Unange	Addition	
1	ELIADRESS 3404 LEARDACE C		e, S .	e, S.		4. 2 NAME 4.3 STREET ADDRESS							
CHY.ST. 710 JACKSON LINE E.			* ~ .	20218			T- ZIP	ľ					l
Ť	TLE	D. V. 13	. <u>حرب</u> ۱۱	DELETE	5.1 7		1-211				Change	Addition	1
N	JME	ARNOLD JACKS!	N -	alditu	5.2 N	AME]			-		
sī	REET ADDRESS	DIVIN ARNOLD TACKS!	CR.	> -		TREET	ADDRESS]					1
_	1Y-\$1-ZIP	JAX IEC, BS:	-18		_	~	T-ZIP	ļ					1
ł	TLE	Do, V.P.		DELETE	6.1 7						Change	Addition	
	IMÉ	LAMAR ROBERT BE	TZ	addition				,					
1	REET ADORESS	2404 LEAFDALE CR	, S				ADDRESS						1
	TY-ST-ZIP	certify that the information sumplied with	this filmo	does not quality for			I-ZIP tion stati	ed in S	ection 119.07(3)(i), Florida Statutes, I fur	ther cer	ify that the	information	-
\	indicated	on this annual report or supplemental	annual reg	ort is true and acc	urale an	id the	at my sig	onature	shall have the same legal effect as if many characters and the same legal effect as if many characters and the characters and the characters and the characters are characters.	ade und	er oath: tha	at I am an	

indicated on this annual report or suppliemental 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:

JULIANA BETT - JACKSON OFFICER OR DIRECTOR

3/4/98

75/-15 08 003723