SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000027688 (5)

REVOLVING DOORS, INC.

Principal Place of Business

906 SEMINARY STREET KEY WEST FL 33040

Mailing Address

906 SEMINARY STREET KEY WEST FL 33040

FILED Oct 07 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualified		
				03/24/1997		
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 2339 SW 8drd Way 26 2339 SW 8And U			nd wan		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	····	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 NOTH	LANGERBOLE PC	28 NOTTH LANGUAN	nee Fl	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the curre	ent year Intangible	
24 330E	8 _ 25 Bravier	29 33060	10 Brownia	 Personal Property Tax due June 30. 	Yes I No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered A	Agent	
TAVARES, MICHAEL A 81 Name						
906 SEMINARY STREET				32 Street Address (P.O. Box Number is Not Acceptable)		
KEY WEST FL 33040				339 5W SANK Way		
83						
84 C						
84				H honderdale FL	85 Zip Code	
11. Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statules, 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 accopt the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.						
SIGNATURE						
	Signiture: Typed or printed name of registered agent is		Registered Agent signature re			
12.	OFFICERS AND	man and the second second	13.	ADDITIONS/CHANGES TO OFFICERS AN	<u></u>	
TITLE	D	L JOELETE	1.1 TITLE	L		
NAME	TAVARES, MICHAEL A		1.2 NAME	ann e a Cara a ca	1	
STREET ADDRESS	906 SEMINARY STREET		13 STREET ADDRESS	339 SW BLANK WING NOTTH LANDERDARE PL 3.	_	
CITY-ST-ZIP	KEY WEST FL 33040		1.4 CHTY-S1-ZIP ▲	JUSTA Apoderdale R 3	3068	
TITLE		[_] DELETE	2.1 TITLE	[Change Addition	
NAME			2.2 NAME			
STREET ADDRESS	·		2.3 STREET ADDRESS			
CITY-ST-ZIP			24 CITY-ST-ZIP			
TITLE		[] DELETE	3.1 TITLE	The second secon	Change Addition	
NAME		-	3.2 NAME	300002659 1	#EQ. (#EQ. ()	
STREET ADDRESS			3.3 STREET ADDRESS	-1 0/08/9801058 - 0	11.6	
CITY-ST-ZIP			3.4 City-ST-ZIP	***150 . 80		
TITLE	-	DELETE	4 1 TITLE		Change Addition	
NAME			4.2 NAME	ų.		
STREET ADDRESS			4.3 STREET ADDRESS		4/1/11	
CITY-ST-ZIP			4.4 City-S1-ZIP		111141	
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME		i j pictiet	5.2 NAME	L	, a stronge [] radicoll	
STREET ADDRESS			5.3 STREF I ADDRESS			
1 1			5.4 CITY-ST-ZIP			
CITY-ST-ZIP		DELETE	6.1 TITLE		Channa []	
1		[]DELETE	6.2 NAME	L.	Change Addition	
NAME			E			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP		in film dans not on all film to	6 4 CITY-ST-ZIP	140 07/23/6) Florido Notation 15 de	of the information	
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 changed, or on an attachment with an address.						

9-15-98

957-721-1977