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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saladra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 1. Corporation Name P97000030100 (6)

FENDER SLENDER, INC.

Principal	Place	of	Busines

Mailing Address

**FILED** Jul 08 1998 8:00am Secretary of State



PINELLAS PARK FL 33781	PINELLAS PARK FL 33781	Н				
THEORY TANK I LIVE		DO NOT WRITE IN THIS SPACE				
		3. Date Incorporated or Qualified				
A Dringing Disco of Dusings	1 - 11-10- 1-1-1		03/31/1997			
2. Principal Place of Business  21 4260 109+ AVE N	2a. Mailing Address 26 42(a) 109+	AVE N	4. FEI Number 2/2/805	Applied For Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	7 TV C	3/3/5/60	\$8.75 Additional		
22	27		5. Certificate of Status Desired	Fee Required		
23 Pinchas Park FL	Gily & State	BOV FI	6. Election Campaign Financing	\$5.00 May Be		
Zip Country	28 Kne 1/05	Country	Trust Fund Contribution	Added to Fees		
24 33781 25 USA	<u> </u>	30 USA	<ol> <li>This corporation owes or has paid the outpersonal Property Tax due June 30.</li> </ol>	rrent year intangible		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
PAUL, DOUGLAS G		81 Name				
4421 68TH AVENUE, NORTH		99 Creat Address	(D.C. Do. M I N I I N I N I N I N I N I N I N I N	<del></del> .		
PINELLAS PARK FL 33781			et Address (P.O. Box Number is Not Acceptable)			
-		83				
		84 City		85 Zip Code		
			FL	<u> </u>		
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State	i2 and 607.1508, Florida <b>Statutos</b> : of Florida, Such change was au	s, the above-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its registered		
agent I am familiar with, and accept the oblig	ations of Section 607.0505, Flori	ida Statutes.	application of the colors. The copy accept the applications	politiment as registered		
SIGNATURE						
Signifure, typod or printed name of registered age  12. OFFICERS AN	D DIRECTORS  (NOTE:	Registered Agent signature required 13.		D DIDECTORS IN 40		
TITLE COM ANICORS	DELETE	11 TITLE C	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition		
NAME PHILL DUTGUTS	41	1.2 NAME	Here!			
STREET ADDRESS 4260 695 FIVE	<b>K</b>	1.3 STREET ADDRESS	1260 6	9th Aut 1/		
CITY-ST-ZIP PINEIIAS PARK I	F1 3378/	1.4 CITY-ST-ZIP	4. 1/4.5 Rek \$1. 33781	,		
TITLE	DELETE	2.1 1\TLE		Change Addition		
NAME		2.2 NAME				
STREET ADDRESS		2.3 STREET ADDRESS				
CITY-ST-ZIP ,		2. 4 CITY-ST-ZIP				
TITLE	☐ DELETE	3.1 TITLE		Change Addition		
NAME		3.2 NAME				
STREET ADDRESS ,	,	3.3 STREET ADDRESS				
CITY-ST-2IP		3.4. CITY-ST-ZIP				
TITLE	☐ DELETE	4.1 TITLE		Change Addition		
NAME		4. 2 NAME				
STREET ADDRESS .		4.3 STREET ADDRESS				
CITY-ST-ZIP	I DEVETE	4.4 CITY - ST - ZIP				
TITLE	☐ DELET <b>E</b>	51 TITLE		☐ Change ☐ Addition		
NAME CORRECT ADDRESS		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	DFLETE	5.4 CITY - ST - ZIP		Change Addition		
	□ DECER	6.1 TITLE	10000258333	Change Addition		
NAME CTREET ADDRESS		6.2 NAME	10000258333 -07/08/980107703	5 Y 5		
STREET ADDRESS		6.3 STREET ADDRESS	***150.00	· ΛΛ.		
CITY-ST-ZIP  14. I hereby certify that the information supplied w	ith this filing does not qualify for	6.4 CITY-ST-ZIP the exemption stated in Se	action 119 07(3)(i) Florida Statutas I further of	artify that the information		
indicated on this annual report or supplementa officer or director of the corporation or the rece Block 12 or Block 13 if changed, or on an attack.	al annual report is true and accur giver or trustee empowered to ex	ate and that my signature	shall have the same lengt effect as if made un	ider noth: that I am an		