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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

P97000034148 (1)

ARCOOL, INC.

Principal Place of Business

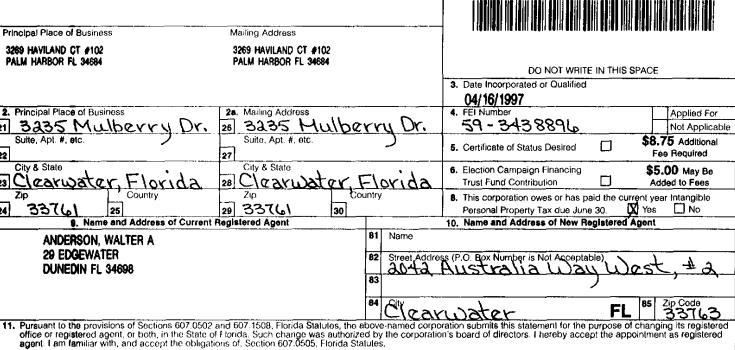
PALM HARBOR FL 34684

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## FILED May 08 1998 8:00am Secretary of State



SIGNATURE					
	Signature, typed or pontent name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
12.	OFFICERS AND DIR		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	P	☐ DELĒT <b>E</b>	1.1 TITLE		Change
NAME	rosenberg, steve		1.2 NAME		_
STREET ADDRESS	3269 HAVILAND CT #102		1.3 STREET ADDRESS	3235 Mulberry L	ا۲،
CITY-ST-ZIP	PALM HARBOR FL 34684		1.4 CITY-ST-ZIP	Clearwater FL :	11 <i>16</i> 8
TITLE	V	☐ DELETE	2 1 TITLE	- · <b>,</b>	Change Addition
NAME	<b>ANDERSON, WALTER A</b>		2.2 NAME		ا ـ د ــد د ،
STREET ADDRESS	29 EDGEWATER		2.3 STREET ADDRESS	2042 Australia Wa	y West, # a
CITY-ST-ZIP	<b>DUNEDIN FL 34698</b>		2. 4 CITY - ST- ZIP	Clearwater, FL 33	763
TITLE	1	DELETE	3.1 TITLE	A. '	Change   Addition
NAME	ANDERSON, NICOLE S		3.2 NAME	NICOLENROSEUBERED 3235 Mulberry D	
STREET ADDRESS	3269 HAVILAND CT #102		3.3 STREET ADDRESS	3235 Mulberry U	r.
CITY-ST-ZIP	PALM HARBOR FL 34684		3.4. CITY-ST-ZIP		3761
TITLE		☐ DELETE	4.1 TITLE	SECRETARY	Change X Addition
NAME		•	4. 2 NAME	Anderson Lois H	
STREET ADDRESS			4.3 STREET ADDRESS	acta Australia War	uWest.#a
CITY - ST - ZIP			4.4 CITY-ST-ZIP	Clearwater, FL	23763
TITLE		☐ DELETÉ	5.1 TITLE		Change Addition
NAME			5.2 NAME		)
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	·	
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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 supplied 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.

V 1/21.98 V 517-701.2871