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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham 🥕 🐣

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business	Mailing Addi	
2207 E. 13TH AVE. TAMPA FL 33605	2207 E. 1370 Tampa Fl 3	

FILED Feb 25 1998 8:00am Secretary of State

	MENT # P970(CORPORATION	00047663 (4)		11811 1811 18 CIVIL BINA 114 118 1181
Principal Plac	e of Business	Mailing Address			
2207 E. 13TH AVE. 2207 E. 13TH AVE.					
TAMPA FL 33		TAMPA FL 33605			
				DO NOT WRITE IN THI	IS SPACE
				3. Date Incorporated or Qualified	
2 Principal P	lace of Business	2a. Mailing Address		05/27/1997 4. FEI Number	. Applied For
21		26		59-3447609	Not Applicable
Suite, Apt	#, otc	Suite, Apt. # etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		[28]		Trust Fund Contribution	Added to Fees
Zip	Country	Z _I ρ	Country	8. This corporation owes or has paid the	current year Intangible Yes No
24	25 Name and Address of Cu	reent Registered Agent		Personal Property Tax due June 30. 10. Name and Address of New Registere	
N/A		TOM HEGIOTOLO AGON	81 Name	IO. Italino sito Addition of their registers	ou rigorit
	WAS, FARAH A D7 E. 13TH AVE.				
	MPA FL 33605		82 Street A	ddress (P.O. Box Number is Not Acceptable)	
174	M# A 1 E 00000		83		
			84 City	F	85 Zip Code
SIGNATURE	ini familiar with, and accept the of	. Ingest and the Unique above — (N	OTE Fregistered Agent signature r		
12.	PTD	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	RAZEK, RAIDA A	C vicin	1.2 NAME		
STREET ADDRESS	2207 E. 13TH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33605		1.4 CITY - ST - ZIP		
TITLE	\$D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	NAWAS, FARAH A		2.2 NAME		
STREET ADDRESS	2207 E. 13TH AVE.		2 3 STREET ADDRESS	· →	
CITY-ST-ZIP	TAMPA FL 33805		2. 4 CITY-ST-ZIP		
TITLE		□ DELEJE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3 4 CITY-ST-ZIP 4 1 TITLE		Change Addition
NAME		□ MILLE	4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		. <u> </u>	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. Thereby 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 with the 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 with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on the same legal effect as if made under oath; that I am an office or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on the same legal effect as if made under oath; that I am an office or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on the same legal effect as if made under oath; that I am an office or director of the corporation or the receiver or trusted empowered to execute the same legal effect as if made under oath; that I am an office or director of the corporation or the receiver or trusted empowered to execute the same legal ef