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

FILED

Apr 21 1998 8:00am

Secretary of State

DOCUMENT # P97000048029 (7)

DOUGLAS C. BUCHAN & ASSOCIATES, INC.

			= .= .			
Principal Place of Business Mailing Address					s reasistati rati anere natire metri antile malle mille itali italit itali itali itali itali	
1067 42ND AVE NE 1067 42ND AVE NE ST PETERSBURG FL 33703 ST PETERSBURG FL 337				3		
						DO NOT WRITE IN THIS SPACE.
						3. Date Incorporated or Qualified
◆ Delegie al Di						05/29/1997
-	ace of Business		2a, Mailing Address			4. FEI Number Applied For
Suite, Apt. +	# atc	Suite, Apt. #, etc.	[26]			59 - 3451161 Not Applicable
22		[27]				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip ¬	Country	Zip	Cou	ntry		This corporation owes or has paid the current year Intangible
4	[25]	[29]	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer	it Hegistered Agent		81	Name	10. Name and Address of New Registered Agent
	CHAN, DOUGLAS C			01	Marrie	
106			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
ST	PETERSBURG FL 33703					
				83		
			}	84	City	- 85 Zip Code
					-	FL 85 Zip Code corporation submits this statement for the purpose of changing its registered
12. TITLE NAME	Signature, typed or pointed name of register is ap- OFFICERS ANI D BUCHAN, DOUGLAS C		13. 1.1 TIT	Ll.		equirod whon reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
STREET ADDRESS	1067 42ND AVE NE				address	
CITY-ST-ZIP	ST PETERSBURG FL 33703	The series	1.4 CI		r- 7(P	
TITLE		[_] DELETE	2.1 TH	LE		Change Addition
NAME			2.2 NA			
STREET ADDRESS			2.3 ST	BEET :	ADDRESS	
CITY-ST-ZIP	, ,	· · · · · · · · · · · · · · · · · · ·	2. 4 CI		T-ZIP	
TITLE		L) DELETE	3.1 711		1	Change Addition
NAME			3.2 NA	ME	ĺ	
STREET ADDRESS			3.3 ST	REET	ADDRESS	
CITY-ST-ZIP			3 4. Cl		1 - ZIP	
TITLE				4.1 TITLE		Change Addition
NAME			4 2 N/	\ME	1	
STREET ADDRESS			4.3 ST	REET	ADDRESS	
CITY-ST-ZIP			4.4 CIT	Y-ST	- ZIP	
TITLE	DELETE 5		5.1 T i7	LE		☐ Change ☐ Addition
NAME			5.2 NA	MÉ		
STREET ADDRESS			5.3 \$10	REET A	ADDRESS	
CITY-ST-ZIP			5.4 CIT	Y - ST	-ZIP	
TITLE	DELETE			6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NA	ME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 CIT			
14 I hereby ce	ertify that the information supplied wi	th this filing does not qualify for	or the exe	mpti	ion stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of	on this annual report or supplementa	Lannual report is true and acc	curate and	Itha	t my siana	ature shall have the same legal effect as if made under oath; that I am an equired by Chapter 607, Florida Statutes; and that my name appears in

11/1/160