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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1998

FILED Mar 24 1998 8:00am Secretary of State

DOCU	IMENT	'# P97	0000	48246 (7)					
		FIED SERVIC		•						
Dul	. DIYLIIGII	ILD GENVIO	LO, INO.						## ### # 14## 11### #	IÈIA BHI JAGI
Principal Place of Business				Mailing Address						1818 B(II) (B a i
10846 137TH STREET N.			,	•						
10040 1371H SINEEL N. LARGO FL 33774				10846 137TH STREET N. LARGO FL 33774						
								DO NOT WRITE IN 1	THIS SPACE	
								3. Date Incorporated or Qualified		
								05/29/1997		
2. Principal Place of Business				2a. Mailing Address				4. FEI Number		Applied For
21				[26]				59-3450349		lot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	4 4 4	Additional
22 City & State				City & State					····	Required
City & State				City & State				6. Election Campaign Financing		May Be
Zip		Country	28	Zip	Count	···		Trust Fund Contribution	7,0000	to Fees
24		25	20	7 ·	—	У		8. This corporation owes or has paid th		ntangible No
24 25 29 30 p. Name and Address of Current Registered Agent								Personal Property Tax due June 30. 10. Name and Address of New Registe		L IND
.10					8	Name	9	10. 110110 110110 1101110 1101110	orou Agont	
JOSWIG, DEBORAH L 10846 137TH STREET N.										
LARGO FL 33774						Street	t Addres	ss (P.O. Box Number is Not Acceptable)		
	4100 IL 00	114			8	1				
					8-	City		1	FL 85 Zip	Code
11. Pursuant	to the provis	ions of Sections (307.0502 and	607.1508. Florida S	statutes, the above	/e-namer	d corpor	ation cultimite this statement for the nurse	on of observing	ite registered
Dilice of	registereo ag	jeni, or both, in th	ie Siale of Fiol	rida. Such change of Section 607.050	was authorized t	iv the co	rporatio	n's board of directors. I hereby accept the	e appointment a	s registered
_	autiliar wi	ип, апо ассери п	e boligations (or, section 607.050	o, riorida Statute	85.				i
SIGNATURE	Signature, typed	or printed name of reg :	stered agent and th	le if applicable	(NOTE: Registered A	ent signatur	re required	when reinstating) DA	ATE	
12.		OFFICE	RS AND DIRE	CTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	☐ DELE TE		1.1 TITLE		Τ //	-	☐ Change	Addition		
NAME			1.2 NAME		DE	BORAH L. DSWIG- 146 131 H STREET N		, I		
STREET ADDRESS	1				1.3 STREET ADDRESS		102	146 137 STREET IV	./	
CITY-ST-ZIP				1.4 CiTY-	ST-ZIP	121	4R60 FL 3377	y		
TITLE		DELETE			2.1 TITLE		V	17	Change	Addition
NAME					2.2 NAME		ER	IC U. JOSWIG	,	
STREET ADDRESS					2.3 STREE	3 STREET ADDRESS 10846 1375 STREET N			•	
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP	6	LARGO FL 33774			
TITLE				☐ DELETE	3.1 TITLE				☐ Change	Addition
NAME					3.2 NAME					
STREET ADDRESS					3.3 STREE	T ADDRESS				
CITY-ST-ZIP					3 4. CITY-	ST-ZIP				
TALE	-			DELETE					☐ Change	Addition
NAME					4. 2 NAME				•	- 1
STREET ADDRESS					4.3 STREE	ADDRESS				
CITY-ST-ZIP					4.4 CITY-	ST-71P				!
TITLE	_ _			DELETE			†		Change	Addition
NAME					5.2 NAME					
STREET ADDRESS					1	ADDRESS				1
CMY-ST-ZIP					5.4 CITY -					1
TITLE	_			DELETE		71 - 4H	1		Change	Addition
NAME					6.2 NAME				Sitting Company	
STREET ADDRESS I					E CO CTOCC	VUUDEcc				
STREET ADDRESS CITY-ST-ZIP					6.3 STREE 6.4 CITY -					

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.

3-13-98 013-592-022