## 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 #** P97000049103 (9)

TOMMIE B. BUTTS JR. ENT  Principal Place of Business  6560 S.W. 8TH ST. NORTH LAUDERDALE FL 33068	Mailing Address  6560 S.W. 8TH ST. NORTH LAUDERDALE		DO NOT WRITE IN 1	
			3. Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address		06/02/1997 4. FEI Number 65-0759959	Applied For
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5,00 May Bo Added to Fees
Zip         Country           24         25	Zip 29	Country 30	This corporation owes or has paid the Personal Property 1ax due June 30.	curren year Intangible Yes D No
9. Name and Address of (			10. Name and Address of New Register	
BUTTS, TOMMIE B JR.		81 Name		
6560 S.W. 8TH ST.		82 Street	Address (P.O. Box Number is Not Acceptable)	
NORTH LAUDERDALE FL 33068		83		
		84 City	F	EL 85 Zip Code
agent. I am familiar with, and accept the SIGNATURE Signature typed or privated name of regist	obligations of, Section 607.0505, F	lorida Statutes. 21 Hegisterod Agent signalure		tt.
12. OFFICER	RS AND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
NAME BUTTS, TOMMIE B JR	<del></del> -	1.1 TITLE 1.2 NAME	P/1,3/0, C/M	C Criange (E) Addition
STREET ADDRESS 6560 S.W. 8TH ST.				
CITY-ST-ZIP NORTH LAUDERDALE		1.3 STREET ADDRESS	SAME AS IN OL	ock 12
TITLE	FL 33068		P/T; S/D; C/M SAME AS IN BL	ock 12
NAME		1.3 STREET ADDRESS 14 CITY-ST- 21P 2 1 TILLE	SAME AS IN BL	∪€K 12 □ Change □ Addition
	FL 33068	1.3 STREET ADDRESS 1.4 CITY-ST-7IP 2.1 TITLE 2.2 NAME	SAME AS IN BL	
STREET ADDRESS	FL 33068	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	SAME AS IN BL	
	FL 33068	1.3 STREET ADDRESS 1.4 CITY-ST-7IP 2.1 TITLE 2.2 NAME	SAME AS IN BL	
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14. I hereby certify that the information supplied with this filling 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 supplemental 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.

**FILED** 

Jan 15 1998 8:00am

Secretary of State