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

PROFIT

FILED May 08 1998 8:00am

ANNU	JAL REPORT		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Secretary of State
1	MENT # IN Name ILAND OF AME	P970000 5	50886 (5)		
Principal Place of Business Mailing Address					ı tağında iya jarir isatı barıl balıt safal aktıl safal bilit safat ibidi tötle olit tabı
945 8. BABCOCK STREET 945 S. BABCOCK STREET MELBOURNE FL 32901 MELBOURNE FL 32901					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 06/10/1997
2. Principal P	lace of Business	2a.	Mailing Address		4. FEI Number Applied For
21		26			59 - 3463194 Not Applicable
Suite, Apt.	#, etc	27	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & Stat	0		City & State		6. Election Campaign Financing \$5.00 May Be
23 Zip	Co	untry 28	2:p	Country	Trust Fund Contribution Added to Fees
24	25	29	· •	10	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	g, Name and A	dress of Current Regis	tered Agent		10. Name and Address of New Registered Agent
	DOGE, HOWARD			81 Name	Richard Hellenberg
945 S. BABCOCK STREET 82 Street				82 Street	Address (P.O. Boy Number is Not Acceptable)
M	ELBOURNE FL 32	901		83	15 S. 13 14BCOCK St.
				84 City	Nelpourne FL 85 Zip Code 32901
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I a	m familiar with, glid	accept the obligations of	f, Section 607.0505, Flori	da Statutes	4
SIGNATURE		I name of registered agent and the	d avoicable (NOT)	Registered Agent signature	4 28 9
12.	Signature, Office to provide	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			DELETE	1.1 TITLE	Chairman, Director Change Addition
NAME				1.2 NAME	Jih walter
STREET ADDRESS				1.3 STREET ADDRESS	4320 W. Kennedy Blod
CITY-ST-ZIP			The second	1.4 CITY-ST-ZIP	Tampa, FL 33609
TITLE			DELETE	2.1 TITLE	President, CO Secretary, Change Raddition Robert Beglev Director
NAME Street address				2.2 NAME 2.3 STREET ADDRESS	100 4 11 1 10 11 11
CITY-SI-ZIP				2.4 CITY-ST-ZIP	me bocerne RL 32901
TITLE			DELETE	3.1 TITLE	(Ice Presidents Director Change & Addition
NAME				3 2 NAME	Eric Ebbert
STREET ADDRESS				3 3 STREET ADDRESS	4320 w. Kennedy Blud.
CITY-ST-ZIP				3.4. CITY-ST-ZIP	Tana Ru 37600
TITLE			☐ DELETE	4.1 TITLE	Vice Mesident, Director Change Addition Roboer was Iter 4320 W. Kennedy Blad.
NAME				4. 2 NAME	use he Kenneda Bled.
STREET ADDRESS				4.3 STREET ADDRESS	Tampa, FC 33609
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Change Addition
NAME			_	5.2 NAME	
STREET ADDRESS				5.3 STREET ADDRESS	
CITY - ST - ZIP				5.4 CITY - ST - ZIP	
TITLE			DEFELE	6.1 TITLE	Change Addition
NAME				6.2 NAME	
STREET ADDRESS				6.3 STREET ADDRESS	

FLORIDA DEPARTMENT OF STATE

14. Thereby 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 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 attackment with an address.