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 #
1. Corporation Name P97000060945 (7)

MESTER MANAGEMENT, INC.

FILED Jun 04 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		1 120(17Q1 110 1011) 12D11 4D111 00111 Q0111 Q0111 7Q111 1	tirtu matuk ibiri dibah besi chés
4815 4TH ST.	4815 4TH ST.			
WEST BRADENTON FL 34207 WEST BRADENTON FL 34207		4207	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
			07/14/1997	
2. Principal Place of Business	2a. Mailing Addres	7	4. FEI Number	Applied For
21 5209 2675		DIVE_	APPLIED	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 BRADENTON, F	City & State		6. Election Campaign Financing	\$5.00 May Be
	28 Zip	Country	Trust Fund Contribution	Added to Fees
Zip Country 24 3 4267 25 MANN	200 211	30	 This corporation owes or has paid the or Personal Property Tax due June 30. 	current year Intangible
9. Name and Address of C	urrent Registered Agent	130	10. Name and Address of New Registere	d Agent
CORPORATION SERVICE COM		81 Nar >	PNO SIC 00.	
1201 HAYS STREET	II (NI)	82 S N	'enn (F.C 3nx Number is Not Ancentation	
TALLAHASSEE FL 32301-2525	•	02	and (EV. 1994 All matter 18 1401 An Column 1	
THE THOUSE I E DECOT EVEN		83	<u> </u>	
		84		ag Zin Codo
		04	F	L 85 Zip Code
agent. I am familiar with, and accept the SIGNATURE Signature, typod or printed name of register	red agent and title if applicable (NOT	f : Registered Agent signature requ		
	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
THE PRESIDENT	ESTEC DELETE	1.1 THTLE	Ec. TREASURA	☐ Change ☐ Addition
NAME GAZY 2. PA		1.2 NAME 1.3 STREET ADDRESS	•	
STREET ADDRESS 5209 24 7777	EX 34207	1.4 CITY - ST - ZIP		
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-S1-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	T AFLETE	4.4 CITY-ST-ZIP		C Channel C 14420
TITLE	DELETE	5.1 TIFLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		6.2 NAME		FT Oligina FT vanifiett
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	_			
		6.4 CiTY-ST-ZIP		

al report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the execution of the exe indicated on this annual report or supplement officer or director of the corporation or the red Block 12 or Block 13 if changed, or on an all