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**

DOCUI	MENT # P97000	0061243 (6)		
SITE SEARCH, INC.) - 18 BUILDE ING 18 MIN ING 18 BUILDE BUILD BUI
Principal Place	o of Dusinger	Mailing Address		
)		-		
37824 AMELIA AYE. 37824 AMELIA AVE. DADE CITY FL 33525 DADE CITY FL 33525				
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
	: :			07/14/1997
2. Principal P	lact of Business	2a. Maiting Address		4. FEI Number Applied For
21	:	26		59-347051b Not Applicable
Sulte, Apt.	#. €tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State	<u> </u>	City & State		Fee Hequired
23	:	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 4	25	· l. il	10	Personal Property Tex due June 30. X Yes No
	e. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered Agent
SUMPLUEN, DIANA				RICHARD MISEYRO
37824 AMELIA AVE. * DADE DITY FL 33525			82 Street	Address (P.O. Box Number is Non Acceptable)
DADE 911 11 33320				7,000
½ -			84 City	DAY CITY - 85 Zip Code -
				UADE (1) FL [3352)
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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE				
12.	Signature, typed or printed nank of registered age: OFFICERS AND		Registered Agent signal re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PLESIDENT	DELETE	1.1 TITLE	PRESIDENT Change X Addition
NAME	DIANA SCHNEIDER	•	1.2 NAME	RICHARD & MISEYKO
STREET ADDRESS	37824 AMELIA AVE		1.3 STREET ADDRESS	37824 AMELIA ANE
CITY-ST-ZIP	DADE CITY, FL 3	3525	1.4 CHTY-ST-ZIP	DADE CITY, FL 33525
TITLE	÷	[] DELETE	21 TITLE	VP Change Addition
NAME			2.2 NAME	DIANA SCHNEIDEL
STREET ADDRESS CITY-ST-ZIP	*		2.3 STREET ADDRESS 2.4 City-St-Zip	DADE CITY, FL 33525
TITLE	ė	DELETE	3.1 TITLE	Change Addition
NAME	en and and and and and and and and and an		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP	<u>.</u>		3.4. CITY - ST - ZIP	
TITLE	:	DELETE	4.1 TITLE	Change Addition
NAME	÷ #		4, 2 NAME	
STREET ADDRESS	7 1 2		4.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
NAME	हैं। 7 3 8	C) prittie	5.2 NAME	ייטואא בי סוומווער בי סוומווער בי סוומווער
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	₹ 2		5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	No.		6.2 NAME	5000025762 1 5 -06/30/9801012044
STREET ADDRESS	्र व		6.3 STREET ADDRESS	-05/30/9801012044 /i.b°
CITY-ST-ZIP	9		6.4 CITY-ST-ZIP	***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther 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 oppears in Block 12 or Block 13 if changed, or on an attachment with an address.

h 4/20/00X

FILED

Jun 30 1998 8:00am

Secretary of State