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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000061510 (8)

FUTUR	E FIRST INC.	, ,			
Principal Place	e of Business	Mailing Address			8 (1881 1188): 8 (1881 1188) 8 (18
12310 BELCHER RD. SOUTH 12310 BELCHER RD. SO LARGO FL 33773 LARGO FL 33773			JTH	DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	
				07/14/1997	
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 59-3457432	Applied For Not Applicable
Suite, Apt. #, etc. S		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
		City & State		6. Election Campaign Financing	\$5,00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	· · · · · · · · · · · · · · · · · ·	30	Personal Property Tax due June 30.	Yes No
	Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registers	ad Agent
	Derson, Keith		81 Name		
425 SOUTH BAYSHORE MADBIRA BEACH FL 33708			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83	····	
			84 City		85 Zip Code
··				poration submits this statement for the purpose tion's board of directors. I hereby accept the a	·L. `
SIGNATURE		D DIRECTORS	Registered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	ANDERSON, KEITH		1.2 NAME		
STREET ADDRESS	425 SOUTH BAYSHORE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MADEIRA BEACH FL 33708	DELETE	14 CITY-ST-ZIP		Change Addition
TITLE	D ELETCHED EADI	DELETE	21 TITLE		Change Addition
NAME Street address	FLETCHER, EARL 137 WALL ST.		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	REDINGTON SHORES FL 33	708			
TITLE	TITOLIA OLIVINO LE 00	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		, <u> </u>
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-\$T-ZIP	_		3 4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-\$1-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T Berete	5.4 CiTY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAMI		
STREET ADDRESS			6.3 STREET ADDRESS		

14. Thereby certify that the information supplied with this filing 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 attaction with an address.

4-22-98