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

FILED Jul 08 1998 8:00am Secretary of State

DOCUMENT #

SOURISCHE BRAGA					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
2. Principal Place	of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number	Applied For	
21		26	26			65-0174676	Not Applicable	
Suite, Apt. #, 6	tc.	Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Z ip	Country 30			8. This corporation owes or has paid the current year latangible Personal Property Tax due June 30.		
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
LAN OFFICE OF ROBERT B. HAILERAN 1920 E. Hallanowe Beach BIVD Site 701 Hallanonie, 70 33009				81	Name			
				82	83			
				63				
11. Pursuant to the	provisions of Sections 607	.0502 and 607.1508, Flori	ida Statutes, the a	above	-named corp	poration submits this statement for the purpose of	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, and accept the obligations of, Section 607.0505, Florida Statutes. Halleran, P.A. SIGNATURE : Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE NAME 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-7IP 1.4 CITY-ST-ZIP DELETE 21 TITLE ☐ Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE NAME 6.2 NAME -07/08/98--01091--010 STREET ADDRESS 6.3 STREET ADDRESS ***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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 furstee empered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changely, or on an attachment with an address

9*5*4

May 24th, 1998

Q

Dept. Of Corporations State of Florida Annual Report Renewal

To Whom It May Concern:

I was informed by my attorney, Robert Halleran, that I should have received a renewal packet in the mail for my corporation. I never received such a packet. I attempted to download the forms off of the Internet, they were not available. (they **should** be available, it makes sense.) Your staff said they could not fax them (though I offered an 800 fax line to fax to). I had to request them **twice** to receive by mail.

We are a new corporation and I am new at these procedures. Your staff instructed me to send a letter of explanation with the \$150.00 in order to avoid the late fee. Please accept my check for \$150.00. I know now to look for the renewal packet in the future.

Respectfully submitted,

Diana H. Demarest

President

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