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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000064349 (8)

THE CEER GROUP, INC.

Principal	Place (of Business	

Mailing Address

FILED May 04 1998 8:00am Secretary of State



1032 MARINE CLEARWATER FL 33755		1092 MARINE CLEARWATER FL 33755		DO NOT WRITE IN THE	S SPACE			
					 Date Incorporated or Qualified 07/23/1997 			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied F	
21		26					Not Appli	
Suite, Apt. 1		Suite, Apt #, etc.			5. Certificate of Status Desired	T -	.75 Addition ee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		.00 May B	
Zip 14	Country 25	Zip 29	Count 30	ry 	 This corporation owes or has paid the of Personal Property Tax due June 30. 	☐ Yes	ar Intangible	э
	9. Name and Address of Curret	nt Registered Agent			10. Name and Address of New Registere	<u>d Agent</u>		
	A JIRE NA, RICHARD A		8	1 Name				
	2 Marine Earwater FL 33755		8:		dress (P.O. Box Number is Not Acceptable)			
			8	3				
			8	4 City	F	85	Zip Code	
agent. I ar	o the provisions of Sections 607 050 sglatered agent, or both, in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida: Such change was pations of, Section 607.0505. Fl	tes, the abo authorized t orida Statut	ve-named col by the corpora es.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of chang pointme	ing its regist nt as registe	tered red
SIGNATURE	Signature, typed or pointed name of reputerist age	cut and idead applicable (NO)	I Registered A	gent signature requ	uired when reinstating) DATE		~	
12.	OFFICERS AN	ID DIRECTORS	13,		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	CTORS IN 12	2
TITLE	D	☐ DELETE	1.1 TITLE			Cha	ange 🔲 Ad	ddition
NAME	GRAJIRENA, RICHARD A		1.2 NAM					
STREET ADDRESS	1032 MARINE		1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	CLEARWATER FL 33755	[] DELETE	1.4 CITY					
TITLE		DELETE	2 1 1/1LE			☐ Cha	ange L Ac	ddition
NAME			2.2 NAMI	- 1				
STREET ADDRESS				ET ADQHESS	•			
CITY-ST-ZIP TITLE		ET DELETE	2. 4 CITY 3.1 TITLE			Cha	ange A	ddition
NAME			3 2 NAME	í			J- — /"	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			3.4. CITY	ł ·				
TITLE		DELETE	4.1 TITLE			Cha	ange 🔲 Ad	ddition
NAME			4. 2 NAM	E }				
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY	ST-7IP	· · · · · · · · · · · · · · · · · · ·			
TITLE		☐ DELETE	5.1 TITLE			☐ Cha	inge L. Ac	ddition
NAME			5.2 NAME		1.6			
STREET ADDRESS				ET ADDRESS	305/4			,
CITY-ST-ZIP		DELETE	5.4 CITY -	ST-7IP	• •	Carried Service	2000	ddition
TITLE		C ptrtit	6.1 TITLE		8000025107 -05/05/98010440	1444 177	inge ∟_I A0	aumon
NAME Proces Address			6,2 NAME		***150.00	ノゴブ		
STREET ADDRESS			6.3 STREE	T ADORESS	₹₹₹15U.UU			

14. I hereby 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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an adddress.

SIGNATURE:

大多数の高級人を持一一次ははなっ

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