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 # P97000066133 (4)

FILED Jun 04 1998 8:00am Secretary of State

11. 141.	DEVELOPMENT, INC.								
Principal Plac	ce of Business	Mailing A	Address				I 480LIODI 410 IBILL IDDII DOIII BOIII ODIII ODIII ODIII O	ILE CIADI MESA SMAD MIN MAN	
3600 66TH S	ST. N.	3600 66	TH ST. N.			}			
	BURG FL 33710		ST. PETERSBURG FL 33710			İ			
							DO NOT WRITE IN THIS	SPACE	
						3	3. Date Incorporated or Qualified		
Principal I	Place of Business	The Name					07/25/1997		
<u></u>	-lace of Business	} ₁	ng Address				4, FEI Number	Applied For	
Suite, Apt	# etc	[26]	. Apt. #, etc.				59-3460127	Not Applicable	
22		27	, Apt. 11, CO.			5	5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & Sta	te	+_	3 State	· · · · · · · · ·			6. Election Campaign Financing		
23		28				٥	Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip		Coun	try	A	B. This corporation owes or has paid the cu		
24	25	29		30		"		Yes No	
	g. Name and Address of Curre	nt Registered	Agent			10	o. Name and Address of New Registered		
CO	DRPORATION SERVICE COMPAI	٧Y	-	[6	Nan	ne			
12	01 HAYS STREET				2 Stro	ot Addrage (Address (P.O. Box Number is Not Acceptable)		
TA	LLAHASSEE FL 32301-2525		82 Street			ot Modress (dicress (F.O. Box Number is Not Acceptable)		
] ,				ε	13				
				-	4 City			85 Zip Code	
					1 '		FL	_ - ,	
11. Pursuant	to the provisions of Sections 607 05	32 and 607.150	8, Florida Stat u	les, the abo	ve-nam	ed corporation	ion submits this statement for the purpose of board of directors. I hereby accept the app	f changing its registered	
agent La	an f am iliar with, and accept the oblic	ations of, Secti	m change was on 607.0505, FI	aumonzeo Iorida Statu	by the c les.	orporation s	poard or directors. I hereby accept the app	pointment as registered	
SIGNATURE									
	Signature, typical or protect ranse of registerist au			It Registered /	Agent signa	ture required who	en reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS ANI		
TITLE	PELLO DALE D		☐ DELETE	1.1 1111				Change Addition	
NAME	BE LLO, DALE D 360 0 66TH ST. N.			1.2 NAM					
STREET ADDRESS	ST. PETERSBURG FL 33710				ET ADDRES	SS			
CITY-ST-ZIP TITLE	91. PETENSBUNG FL 33/10		DELETE	1.4 CITY 2.1 THTL	- S1 - ZIF			Change Addition	
NAME			DETERE	2.1 IALI				Change Addition	
STREET ADDRESS									
CITY+ST-ZIP					ET ADDRES	·>			
TITLE			DELETE	2. 4 CHY 3.1 THLE	r-51-7IP			Change Addition	
NAME				3.7 NAM				Onunge Required	
STREET ADDRESS					i Fi addres				
CITY-ST-ZIP				i i	- S1 - ZIP	~		,	
TITLE			DELETE	4 1 111(1				Change Addition	
NAME				4. 2 NAN			,	11 777	
STREET ADDRESS					et addres	s	<u> </u>	'h (0/ 11	
CITY-ST-ZIP				4.4 CHY			7,	114141	
TITLE			DELETE	5.1 THTLE				☐ Change ☐ Addition	
NAME				5.2 NAM	E			· _, _	
STREET ADDRESS				5.3 STRE	ET ADDRES	s			
CITY-ST-ZIP				5.4 CITY					
TITLE			DELETE	6.1 TITLE		1		Change Addition	
NAME				6.2 NAM	Į.		20000252253	:2	
STREET ADDRESS				6.3 STRE	ET ADDRES	s	-05/13/980102504	4	
CITY-ST-ZIP				6.4 CHY			***450.00		
	1.1 11	ACTION SECTION	-·						

Thereby 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or fusite 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 attachnic much with an address.

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