## 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 # P97000066387 (6)

Principal Place 1218 DE NAR BRADENTON  2. Principal P	NAEZ AVE. FL 34209	Mailing Address  1218 DE NARVAEZ AVE. BRADENTON FL 34209  28. Mailing Address 26  Suite, Apt. #, etc.		65-0775323 Not A	lied For Applicable
Suite, Apt. #, etc.  22  City & State		27		5. Certificate of Status Desired Serviced Fee Required	
23		City & State		6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to F	
Zip 24	Country 25	Zip <b>29</b>	Country 30	8. This corporation owes or has paid the current year Intangue Personal Property Tax due June 30.	
<del></del>	9. Name and Address of Curre	nt Registered Agent	<del></del>	10. Name and Address of New Registered Agent	
Wattling, Edward 1218 <b>De</b> Narvaez ave. Bradènton fl 34209			81 Name 82 Street A 83	Address (P.O. Box Number is Not Acceptable)	ode
agent. I a SIGNATURE	m familiar with, and accept the oblig	yalions of, Section 607, <b>0505,</b> Flo	E: Registered Agent signature r	oration's board of directors. I hereby accept the appointment as required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	
TITLE	D	DELETE	1.1 TITLE		Addition
NAME STREET ADDRESS CITY-ST-ZIP	WATTLING, EDWARD 1218 DE NARVAEZ AVE. BRADENTON FL 34209		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE	Change [	Addition
NAME STREET ADDRESS	WATTLING, SANDRA 1218 DE NARVAEZ AVE.		2.2 NAME 2.3 STREET ADDRESS	C.m.gv	
CITY-ST-ZIP	BRADENTON FL 34209		2. 4 CITY-ST-ZIP		
TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME	☐ Change [	Additio
STREET ADDRESS City-St-zip			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE NAME		DELETE	4.1 TITLE 4. 2 NAME	☐ Change [	Additio
STREET ADDRESS City-St-Zip			4.3 STREET ADDRESS 4.4 City-SY-Zip		
TITLE Name Street address		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	☐ Change ☐	Additio
CITY-ST-ZIP		<b></b>	5.4 CITY - ST - ZIP		
TITLE NAME		DELETE	6.1 TITLE 6.2 NAME	Change [	Additio
STREET ADDRESS			6.3 STREET ADDRESS		

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 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 of 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 attachment with an address.

941-794-0816 4-14-98

**FILED** 

Apr 20 1998 8:00am

Secretary of State