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

'PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 10 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

	MENT # P97000 ENTERPRISES, INC.	069033 (3)			110 10 11 11 11 11 11 11 11 11 11 11 11
Principal Plac	e of Business	Mailing Address		- 1 (00)(00) (10 10)(1 100); (00)(1 TO)(1 E0)(1 TO)(1 TO)	110 10111 30100 NIOO 1111 1881
37708 TRILBY	r BOAN	37708 TRILBY ROAD			
DADE CITY F		DADE CITY FL 33523			
1		• • • • • • • • • • • • • • • • • • • •		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
Dalmaha at E	Name of Description	2a. Mailing Address		08/08/1997	
— `	Place of Business	ham Andrea to the	-41. 00	4. FEI Number	Applied For
21 00 45 Suite, Apt.	5 Lakeside, DR.	26 8045 Lake Suite, Apt. #, etc.	side, UK.	45-0118-511	Not Applicable \$8.75 Additional
22	.,	27		5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 Ya\	aha. FL.	28 Jalaha.	FL.	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	irrent year Intangible
24 3479		29 34797-3158	30 Lake	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
CUBB, SANURA B					
37708 TRILBY ROAD			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
UA	DE CITY FL 33523		83		
			84 City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose	of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
Ĺ	Signature, typed or printed name of registered agent a		Registered Agent signature require		
12.	OFFICERS AND I	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
NAME	President		1.2 NAME		Cusings CT Appution
STREET ADDRESS	Sandra B Cobb 8045 Lakeside, OR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	Yalaha FL. 34797.		1.4 CITY-ST-ZIP		ļ
TITLE	Source	DELETE	21 TITLE		Change Addition
NAME	Sandra B. Cobb		22 NAME		
STREET ADDRESS	BOYS Lake side, Dr.		2 3 STREET ADDRESS		
CITY-ST-ZIP	Yalaha Fl. 34797	1-3158	2 4 CHTY-ST-ZIP		
TITLE	Treasurer	☐ DELE te	31 TITLE		☐ Change ☐ Addition
name !	Sundra B. Cobb		3.2 NAME		
STREET ADORESS	BOYS LUKES : 4. DO		3.3 STREET ADDRESS		
CITY-ST-ZIP	Yalaha, FL. 34797.	3158	3.4. C/TY-ST-ZIP		
TITLE	Ť	☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		}
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		L. Dillicit	5.1 TITLE 5.2 NAME		C cuarde C vacation
NAME					}
STREET ADDRESS			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
CITY+ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-\$1-ZIP			6.4 CITY-ST-ZIP		
14. I hereby o	ertify that the information supplied with	this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further c	ertify 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 cath; 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 attachment with an address.					

2-10-68 252-5279-2950