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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000071277 (2)

JOHN T. SPILLMAN & ASSOCIATES, INC.

FILED Mar 10 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address							· 4 19811981 119 18111 (951) 48111 48111 48	161 48 4LE 18881 (1	744 11911 18 0 11	1 14E1 18E1
3725 ALCANTAI Miami FL 33170		3725 ALCANTARA Miami Fl 33178					DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified 08/18/1997			
2. Principal Pla	ace of Business	2a. Mailir 26	2a. Mailing Address 26				4. FEI Number 65 - 0775176	Number Applied For 8 - 0 775176 Not Applicable		
Suite, Apt. #	, etc.	27					5. Certificate of Status Desired Fee Required			
City & State		28					6. Election Campaign Financing Trust Fund Contribution Added to Fees			
Zip 24	Country Zip Country 25 29 30 30 S. Name and Address of Current Registered Agent			Count 30	ry 	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
	8	1 Name		10. Name and Address of New Ne	Bitroian WA	, o iii				
GEIGER, RUSSELL ESQ					' Name	U				
	MINORCA AVENUE AL GABLES FL 33134			8	<u> </u>	t Addres	Address (P.O. Box Number is Not Acceptable)			
				8	3					
				8				FL	85 Zip (
office or re	o the provisions of Sections 607 gistered agent, or both, in the S n familiar with, and accept the o	tate of Florida. Su	ch change was	authorized I	ov the co	d corpor orporation	ation submits this statement for the o's board of directors. I hereby acce	ourpose of cl pt the appoin	hanging its ntment as	s registered registered
SIGNATURE _	Signature, typed or printed name of registere	d agent and title it applica	able (NO)	E: Registered A	gent signatu	re required	when reinstating)	DATE		
12.		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	CERS AND D	IRECTOR	S IN 12
TITLE		<u> </u>	DELETE 1.1 T			P	D		Change ;	Addition
NAME				1.2 NAM	Ē	50	HN T. SPILLMAN			i
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STREET ADDRESS				2.3 STRE	ET ADDRESS	;]				
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NAME	•			5.2 NAM					. <i>?</i> //	<u>ہ</u> ا
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City-St-7IP				6.4 CITY	-ST-ZIP	1	4-4-4-100-00			

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 section of the corporation o

JOHN T. SPILLMAN