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 #

P97000071869 (6)

PC AC	n Name TIVE, INC	" F9700	<i>5</i> 007 10	09 (0)	•			<u> </u>
Dischard Dischard Dischard						·		
Principal Place of Business Mailing Address					075 040			
1960 STICKNEY PT. RD., STE. 210					. SIE. 210			
						DO NOT WRITE IN THIS SPACE		SPACE
							3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address							08/19/1997 4. FEI Number	I I and the second
21			<u> </u>	26			5 65-0775128	Applied For Not Applicable
Sulte, Apt.	#. etc.			Suite, Apt. #, etc.				\$8.75 Additional
22			27	27			5. Certificate of Status Desired	Fee Required
City & State	ө		City :	City & State			6. Election Campaign Financing	\$5.00 May Be
23			28				Trust Fund Contribution	Added to Fees
Zip	Ļ	Country	Zip		Country	'	8. This corporation owes or has paid the cur	
25 29 29 29 29 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20					30		Personal Property Tax due June 30. 10, Name and Address of New Registered	Yes No
						Name	IV. Hallo alla Addissa di Hall Hagistolea	Agont
WILDES, CLIFFORD 1960 STICKNEY PT. RD., STE. 210					100	61 - 1 A - I	(DO Day No.)	
	RASOTA FL				82	Street Add	dress (P.O. Box Number is Not Acceptable)	
Chindrin 1E 04201					83			
					84	City		85 Zip Code
							FL	. 🗀 🐪 🔠
office or reagent.	no familiar wit	th, and accept the ob	ligations of, Sect	on 607.0505, F	lorida Statutes	S.	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appured when renstating) DATE	
12.		OFFICERS /	AND DIRECTORS		13.	—	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	D	CHECODO		DELETÉ	1.1 TITLE 1.2 NAME	}		Change Addition i
NAME Street address	WILDES, CLIFFORD ADDRESS 1960 STICKNEY PT. RD., STE			= 910		4DODECC		
CITY-ST-ZIP	ALDIAGE EL ALANI			L. EIU		ADDRESS		
TITLE	D	TATE OFFI		DELETE	1.4 CHY-S 2.1 TITLE	11-21		Change Addition
NAME	HEAPS.	SCOTT A			2.2 NAME			
STREET ADDRESS				ž. 210		ADDRESS		
CITY-ST-ZIP	CITY-ST-ZIP SARASOTA FL 34231					ST-ZIP		
TITLE	D DELETE			3.1 TITLE			Change Addition	
NAME	VILLARES, RAYMOND M				3.2 NAME			
	STREET ADDRESS 1960 STICKNEY PT. RD., STE. 210 SARASOTA FL 34231					ADDRESS		
CITY-ST-ZIP	SAHASU	11A FL 34231		DELETE	3.4. CITY-5	ST-ZIP		☐ Change ☐ Addition
TITLE NAME				La piccic	4.1 TITLE 4.2 NAME			onange
STREET ADDRESS					4.3 STREET	ADDRESS		l
CITY-ST-ZIP					4.4 CITY-S			
TITLE						1		Change Addition
NAME					52 NAME			
STREET ADDRESS					5.3 STREET	ADDRESS		
CITY-ST-ZIP					5.4 CITY - S	T - ZiP		
TITLE				DELETE	6.1 TITLE			Change Addition
NAME					6.2 NAME	ŧ		
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 suppliemental angual 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 of the receive for trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attactivitient with an address.

2/18/90

R2E034 (10/97)

FILED

May 11 1998 8:00am

Secretary of State