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 # P97000073197 (0)

Principal Place of Business Mailing Address 2200 ANVIL ST N ST PETERSBURG FL 33710 Mailing Address 2200 ANVIL ST N ST PETERSBURG FL 33710						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2, Principal P	lace of Business	2a. Mailing Address				08/22/1997 4. FEI Number		 T	Applied For
21		26				59-3486543		_ T	Not Applicabl
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			<u>, , , , , , , , , , , , , , , , , , , </u>				.75 Additional ee Required
City & State		City & State				Election Campaign Financing Trust Fund Contribution			5.00 May Be dded to Fees
Zip 24	Country 25	Zıp 29	Cour	ntry	' 	This corporation owes or has paid Personal Property Tax due June 3	-	ent ye Yes	
	g. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Regi	stered A	gent	
SU ST	59 CENTRAL AVE ITE 201 PETERSBURG FL 33710 to the provisions of Sections 607.05 egistered agent, or both, in the Stal	502 and 607.1508, Florida Statu to of Florida, Such change was	ites, the ab	82 83 84 80ve	City -named corp the corporat	poration submits this statement for the pullion's board of directors. I hereby accept	FL	85 chang	Zip Code ging its registered
agent. I a	m familiar with, and accept the obli- signature, typed or printed name of registered a	gations of, Section 607.0505, F	lorida Statu	ntes	3.	red when reinstating)	DATE		
12.	<u> </u>	ND DIRECTORS	13.	,,,,,,	an algorithm redon	ADDITIONS/CHANGES TO OFFICE		DIRE	CTORS IN 12
TITLE	D PINSKER, HOWARD	DELETE	1.1 TITU 1.2 NAI					Ch	
STREET ADDRESS CITY-ST-ZIP	2200 ANVIL ST NE ST PETERSBURG FL 33710			REET	ADDRESS				
TITLE	011212102011012 00110	DELETE	2.1 TIT		II-EIF			Ch	ange Addition
NAME			2.2 NAI		ļ		•	_ `	• –
STREET ADDRESS			2.3 STF	REET	ADDRESS				
CITY-ST-ZIP TITLE	·	DELETE	2.4 CD	_	ST-ZIP		····	Ch	ange Addition
NAME			3.2 NAJ				•		
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP			3.4. C(1						
TITLE		☐ DELETE	4.1 7071	_				Ch	ange Addition
NAME			4. 2 NA	ME	Ì				

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

51 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

SIGNATURE:)

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

813) 341-2600

Change

Addition

Change Addition

FILED

Apr 16 1998 8:00am

Secretary of State