## 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 # P97000077576 (1)

## FILED Mar 16 1998 8:00am Secretary of State

1, Corporatio	E. FARRIS, P.A.	.,			
Principal Place of Business Mailing Address				I TREAMENT OF INVITATION AND THE AND THE PRINT NAMED IN	
361 S7TH ST N ST PETERSBURG FL 33710		361 57TH ST N ST PETERSBURG FL 33710		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 09/05/1997	
21	lace of Business	2a. Mailing Address 26		4, FEI Number 59-3470376	Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State 28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>Z</b> ip <b>24</b>	Country 25		Country 30		Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
	rris, kevin e		81 Name		İ
361 57TH ST N			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
ST	PETERSBURG FL 33710		83		
			65		
			84 City	FL	85 Zip Code
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 Statute's.					
SIGNATURE	Signature, typed or product same of regestered ag	pent and title of applicable (NOTE)	Registered Agent signature require	ed when reinstating) DATE	i
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DPST	☐ DEFEIE	11 TITLE		Change Addition
NAME	FARRIS, KEVIN E		1.2 NAME		
STREET ADDRESS	361 57TH ST N		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL 33710	I Dr. Cir	1.4 CITY - ST - ZIP		[
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	<b></b>	
CITY-ST-ZIP TITLE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME		E Ditt	32 NAME		cusules two appl
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3.4. City-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CiTY-ST-ZIP		
TATLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		}
CITY-ST-ZIP	<del></del>		64 CITY-ST-ZIP		

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 annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or the reserve or trusted 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 attachin of with an address.

SIGNATURE

- Kevin & Farris

(B12) 347-1749