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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000078428 (4)

BOLES & ASSOCIATES, INC.

FILED Apr 29 1998 8:00am Secretary of State



					881 1911] 13812 1782 1811 1881
Principal Place	of Businoss	Mailing Address			94. 1911, 6.616 11901 1311 1001
802 REGENT CIRCLE NORTH 802 REGENT CIRCLE NORTH BRANDON FL 33511					
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				09/10/1997	
9. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	REGENT CIECLE NORTH		11	59-3469063	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.	<u> </u>		\$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 BEANDON, FL. 28 BRANDON FL			. •	Trust Fund Contribution	Added to Fees
Zip	Country	Zip Co	untry	8. This corporation owes or has paid the o	urrent year Intaggible
24 335	1] 25 HILLSBOROWH	29 33509 30 H	1 ILLS BORDUCH	Personal Property Tax due June 30.	Yes 12 No
	Name and Address of Current I			10. Name and Address of New Registere	d Agent
BOLES, MICHAEL P			B1 Name		
AAA MERENT AIRAI E AIRATTI			82 Street Address (P.O. Box Number is Not Acceptable)		
_,,,			83		
			84 City		85 Zip Code
•				F	L T '
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					
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 Science was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and appendix of Section 607.0505, Florida Statutes.					
SIGNATURE	:- 1/ 11/12/	1. Pokes	(SA)	mE) $4/29/99$	F
Storature Need or put in trace of majorated separational separation of the Programme (NOTE, Registrated Agent separation required when reinstating) DATE					
12.	OFFICERS AND I			ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE 1.1 T	ITLE		Change Addition
NAME	BOLES, MICHAEL P	1.2 M	IAME		2
STREET ADDRESS	802 REGENT CIRCLE NORTH	1.3 \$	TREET ADDRESS		الْمَا
CITY-ST-ZIP	BRANDON FL 33511		CITY-ST-ZIP		
TITLE	D	DELETE 2.1 T	ITLE		Change Addition
NAME	BOLES, VIRGINIA A	2.21	IAME		
STREET ADDRESS	802 REGENT CIRCLE NORTH	235	STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL 33511		CITY-ST-ZIP		
TITLE		☐ DELETE 3.1 T	TILE		Change Addition
NAME		3.21	IAME		
STREET ADDRESS		3.3 \$	STREET ADDRESS		:
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		DELETE 4.1 T	ITLE		Change Addition
NAME		4.21	NAME		į
STREET ADDRESS		4.3 \$	STREFT ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		DELETE 5.1 T	ITLE		Change Addition
NAME		5.2 M	IAME		
STREET ADDRESS		5.3 \$	STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		DELETE 6.1 T	ITLE		☐ Change ☐ Addition
NAME		6.2 N	IAME		
STREET ADDRESS		6.3 \$	STREET ADDRESS		
CITY-ST-ZIP			DITY-ST-ZIP		
14. I hereby c	ertify that the information supplied with	this filing does not qualify for the ex	emption stated in S	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

rate and that my signature shall have the same legal effect as it made under oath, that i am a secule this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the rec Block 12 or Block 13 if changed, or on an all