FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMEN OF STATE

Sandra B. Mor ham

Secretary of State DIVISION OF CORPORATIONS

FILED May 04 1998 8:00am Secretary of State

INTOU	ICH TOO COMMUNICATION)				1 . 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	1 64
	e of Business	Mailing Address						
421 ARROWHEAD TRAIL 421 ARROWH VERO BEACH FL 32963 VERO BEACH						1		
, vano berio		TENO DENOTIFE GEORGE	•			DO NOT WRITE IN THE	S SPACE	
i i	_					3. Date Incorporated or Qualified 09/15/1997		
	at Place of Business 2a. Mailing Address					4. FEI Number	Ar	pplied For
21 440	3 Vincland Rd 26				59.3472412		ot Applicable	
22 56	Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired		Additional equired
City & Stat	and the	City & State				Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 2	Country			ntry		8. This corporation owes or has paid the c	· _ · _ · .	
Zip 328	25 UDA	25 USA 29 30				Personal Property Tax due June 30. Yes No] No
	9. Name and Address of Current	Registered Agent		81 Name		10. Name and Address of New Registere	d Agent	
	ARKETT, BRUCE D		Ì	Name				
756 BEACHLAND BLVD				82 Street	Addres	ss (P.O. Box Number is Not Acceptable)		
VE	ERO BEACH FL 32963		ŀ	B3				
<u> </u>			[
				84 City		F	L 85 Zip	Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was	authorized	i by the cor	l corpo poratio	ration submits this statement for the purpose in's board of directors. I hereby accept the ap	of changing is ppointment as	ls registered registered
	Signature, typed or printed name of registered agen			Agent signaturi	e required	d when reinstating) DATE		f
12.			13.			ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTOR Change	RS IN 12
TITLE NAME	ي نادد				1	Ames B. CAIN		Z Addition
STREET ADDRESS			1.3 STREET ADDRESS		1 -2 F	Ames D. CAIN all avrouhend Trail lero Beach 70 325		Ę
CITY-ST-ZIP	3		1	Y-ST-ZIP	1 73	TERD BEACH The 329	63	
TITLE			2.1 TIT		├ ── ¥		Change	Addition C
NAME			2.2 NA	ME	1)
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS				j
CITY-ST-ZIP			2 4 CITY-ST-ZIP					
TITLE	☐ DELETE		3.1 111	LE			Change	Addition
NAME			3.2 NA					
STREET ADORESS			- 1	REET ADDRESS	1			ļ
CITY-ST-ZIP	DELETE			3.4. CITY-ST-ZIP			Change	Addition
TITLE	L) DELETE			4.1 TITLE 4.2 NAME			∟ Change	☐ Addition
NAME Street address				reet address	1			
CITY-ST-ZIP								
TITLE	DELETE			4.4 CITY-ST-ZIP 51 TITLE			Change	Addition
NAME			5.2 NA		1		•	1
STREET ADDRESS			4	REET ADDRESS	1			
CITY-ST-ZIP				Y-ST-ZIP	}			
TITLE		DELETE	6.1 TIT				Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP	<u></u>			
14. I hereby o	certify that the information supplied wit	th this filing does not qualify f	or the exe	mption state	ed in S	ection 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 eath; that I am an officer or director of the corporation or the receiver or fustor supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or fustor supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or fustor supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or fustor.