## 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

FILED Feb 17 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		a lantianer bin iditik iddir adiri darit darit darit darit	(B) (CADI I)DID ((D)(0 D)(1 1007
100 S ASHLEY DR	100 S ASHLEY DR			
SUITE 890 TAMPA FL 33602	SUITE 890		DO NOT WRITE IN THIS	SPACE
CAMEN EL OXOUZ	TAMPA FL 33602		3. Date Incorporated or Qualified	
			09/18/1997	
2. Principal Place of Business	2a. Mailing Address	Α , Δ.	4. FEI Number	Applied For
21 7651 Medical Da		edical DR	64-34/5348	Not Applicable
Suite, Apt. #, etc.	Suite. Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Hudson FL	28 Hudson	FL	Trust Fund Contribution	Added to Fees
Zip Country	710	Country 30 PASCO	8. This corporation owes or has paid the co	
24 34667 25 PASCO	29 37667	30 PASCO		Yes No
9. Name and Address of Current	t Registered Agent	04 1	10. Name and Address of New Registered	d Agent
DAVIS, SHELDON P		81 Name		
100 S ASHLEY DR SUITE 890		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
		83		
TAMPA FL 33602				
		<b>64</b> City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	2 and 607.1508, Florida Statut	es, the above-named corp	poration submits this statement for the purpose of	of changing its registered
office or registered agent, or both, in the State i agent. I am familiar with, and accept the obliga	of Florida. Such change was a	authorized by the corpora	ation's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE				
Signature, typed or printed name of registered agen				
		E. Registered Agent signature requi		
12. OLEICERS AND	DIRECTORS	13.	olled when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	
12. OFFICERS AND		13.		ND DIRECTORS IN 12 Change Addition
TILE PRESIDENT NAME TORGE AYUD	DELETE	13. 1.1 TITLE 1.2 NAME		
TILE PRESIDENT NAME STREET ADDRESS 7451 VISALUAL DR	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		
TILE PRESIDENT NAME TORGE AYUD	DELETE	13. 1.1 TITLE 1.2 NAME		
TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  OF FRESIDENT  PRESIDENT  TORGE AYAD  TORGE	Hulson FL	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		Change Addition
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named with this unity toos not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information interiorital report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am another certifier or trustee enhanced to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the receiver in a process. indicated on this annual report or supporting of the corporation of the corporation of Block 12 or Block 13 if changed out

SIGNATURE: