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 # P97000086965 (5)

Principal Place of Business	Mailing Address		
805 SW 29 TERR CAPE CORAL FL 33914	605 SW 29 TERR CAPE CORAL FL 33914		
	1.1666)		

FILED Apr 24 1998 8:00am Secretary of State

LIQUID	ASSETS BY DESIGN, IN				
Principal Plac	e of Business	Mailing Address			1 140(186) tib later 1881 86ste Bater 2011 2019 1010 brete entil Grid ditt (ant
605 SW 29 T		605 SW 29 TERR			
CAPE CORAL FL 33914 CAPE CORAL FL 33914					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
		1 (66)			10/07/1997
2. Principal Place of Business 2a. Mailing Address			s		4. FEI Number Applied For
26					65-0766286 Not Applicable
├ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		Suite, Apt. #, etc	**		5. Certificate of Status Desired See Required Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip			ry	8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes X No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registered Agent
	HL, KEVIN C		8	1 Name	
605 SW 29 TERR			8	2 Street Add	ress (P.O. Box Number is Not Acceptable)
CAPE CORAL FL 33914			-	3	
			ľ	٦	
			8	4 City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607 (1502 and 607 1508. Florida	Statutes, the abo	ve-named con	
office or r	registered agent, or both, in the Starm familiar with, and accept the ob	ate of Florida. Such change	was authorized	by the corpora	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
	m lamiliai with, and accept the oc	ligations of, Section 607.050	US, FIDRIDA STATU	es.	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE Registered A	gent signature requi	ired when reInstating) DATE
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELET	TE 1.1 YALA		Change Addition
NAME	MEHL, KEVIN C		1.2 NAM	E	
STREET ADORESS	605 SW 29 TERR		1.3 STAE	ET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL 33914			-ST-ZIP	
TITLE		DELET		•	☐ Change ☐ Addition
NAME			2.2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP TITLE		DELET		r-ST-ZIP	☐ Change ☐ Addition
NAME		_ 0	3.1 111E		C Country
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP				-ST-ZIP	
TITLE		☐ DELET			☐ Change ☐ Addition
NAME			4. 2 NAM	Œ	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP			4.4 CITY	-ST-ZIP	
TITLE		☐ DELET	TE 5.1 TITL		Change Addition
NAME			5.2 NAM	E	
STREET ADDRESS			5.3 STRE	ET ADDRESS	
CITY-ST-ZiP		··-		- ST - ZIP	
TITLE		☐ DELET	TE 6.1 TITLE	:	Change Addition
NAME			. 6.2 NAM	E	
STREET ADDRESS			6.3 STRE	ET ADDRESS	
CITY-ST-ZIP			6.4 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.