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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA **DE**PARTMENT OF STATE

FILED

Apr 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	JMENT # P97000 MANAGEMENT INC	0088447 (2))		
Principal Place of Business Mailing Address					
2316 SUNVIEW AVENUE 2316 SUNVIEW AVENUE VALRICO FL 33594 VALRICO FL 33594			1	DO NOT WRITE IN	I THIS SPACE
				3. Date Incorporated or Qualified	
A Dela electi	Diago of D. vissos			10/14/1997	
21 Principar	Place of Business	2a. Mailing Address 26		4. FEI Number	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			SR 75 Additional
		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	Z ip	Country		Added to Fees
24	25	29	30	 This corporation owes or has paid Personal Property Tax due June 30 	· ·
	9. Name and Address of Curren			10. Name and Address of New Regis	
Pf	ROUT, CHARLES D		81 Name		
2316 SUNVIEW AVENUE			82 Street A	eet Address (P.O. Box Number is Not Acceptable)	
VALRICO FL 33594			83		
			65		
			84 City		FL 85 Zip Code
office or agent. I			utes, the above-named of a authorized by the corportion of the corpor	corporation submits this statement for the purporation's board of directors. I hereby accept the equivalent of the equiv	pose of changing its registered he appointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	
TITLE NAME	DIRECTOR, PRESIDENT	☐ DELETE	1.1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS	CHARLES D. PROUT		1.3 STREET ADDRESS		
CITY-ST-ZIP	ZBIL SUNVION AVE VALRICO, PL 3859	4	1.4 CITY-ST-ZIP		
TITLE	DIRECTOR, SECRETARY	☐ DELETE	2.1 TITLE		Change Addition
NAME	PATRICIA M. MERTE.		2.2 NAME	s. l.m /	
STREET ADDRESS	ZBIL SUNVIEW AVE	.1	2.3 STREET ADDRESS	sunview	
CITY-ST-ZIP	VALRICO, FL 3859	Z DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		E Occesio	3.2 NAME		C CHARGO C MARION
STREET ADDRESS			3.3 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		Λ .
CITY-ST-ZIP TITLE	<u> </u>	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Anange Addition
NAME		Based of Street B	5.2 NAME		8/ 1/
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		IUTIOT
TITLE		DELETE	6.1 TITLE	100002502 -04/28/9801021 ***150.00	Change Addition
NAME	1.		62 NAME	-04/28/9801021	032
STREET ADDRESS	1 1 %		6.3 STREET ADDRESS	米米米1 500、100	

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 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 improvement 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 of in a licitores.