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 # P97000089319 (2)

FLORIDA ISLAND INVESTMENTS, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			Alia larah lisal Piski ahu saal
3400 8 TAMIAMI TRL. SUITE 303 3400 S TAMIAMI TRL. SUITE 303					
SARASOTA FL 34239 SARASOTA FL 34239			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	
				10/16/1997	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 360			4 L T DRIVE	65-0792804	Not Applicable
Suite, Apt.	#, e tc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22				Fee Required	
14 OL MES BEACH 28 HOLMES BEACH			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country		Country	8. This corporation owes or has paid the o	
24 342	17 25 + L.	29 34217	30 + 6.	Personal Property Tax due June 30.	Yes No
	j. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	
JAENSCH, P. CHRISTOPHER 81 Name \mathcal{Z}_{f_2}				ARB KAVANAL	1GH
3400 S TAMIAMI TRL. SUITE 303 82 Street Address				ess (P.O. Box Number is Not Acceptable)	0001010
SARASOTA FL 34239 <u>66 1</u>				10 VIRGINIA CRI	25/1/6
			03 G #	1	
84 City 34-2				LOTUNI VERSITY PROD	2 85 Zip Code 74301
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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505. Florida Statutes.					
SIGNATURE B KGROWANGLE BARB WAVANAUGH 4-30-98					
SIGNATORE	Signature, typod or printed name of registered agent		Regelüred Agont signature recuire	ed when reinstating) DATE	
12.	OFFICERS AND	L	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D DEOTA IOVOVV WALTED	DELETE	1.1 TITLE		L. Change L. Addition
NAME	BESTAJOVSKY, WALTER		1.2 NAME		
STREET ADDRESS	5127 44TH ST. W. BRADENTON FL 34210		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	BESTAJOVSKY, CLAUDIA	C. 561616	22 NAME		
STREET ADDRESS	5127 44TH ST. W.		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34210		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
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		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
HAME			5.2 NAME		タ2
STREET ADDRESS			5.3 STREET ADDRESS		ド. (ス)
CITY-ST-ZIP		☐ DELETE	5.4 CITY - ST - ZIP		Change Addition
NAME			6.1 TITLE 6.2 NAME	7000025228:	
STREET ADDRESS			6.3 STREET ADDRESS	700 0025228: -05/14/98010100	Ī8 d
			6.4 CITY-ST-ZIP	***150.00	
CITY-ST-ZIP	ertify that the information supplied wit	h this filing does not qualify for		Section 119.07(3)(i), Florida Statutes. I further	certify that the information

indicated on this annual report or supplied with this limit does not dealily for me exemption stated in Section 19.07(5)(f), Florida Statutes. Fluring certify that the informatic indicated on this annual report or suppliemental 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 agratian and dress. WALTER RESTATOUSKY