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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700092035 (9)
EXPRESS ACCOUNTING SERVICE, INC.

FILED May 08 1998 8:00am Secretary of State



| Principal Place of Business | Mailing Addre | :SS | | | 4116 11911 43146 11181 4111 1881 | |
|--|---|---|---------------------------------|--|---|--|
| 11230 OLD ST AUGUSTINE RD. SUITE 15 JACKSONVILLE FL 32257 | | 11250 OLD ST AUGUSTINE RD. SUITE 15-125 JACKSONVILLE FL 32257 | | DO NOT WRITE IN THI | S SPACE | |
| | | | | 3. Date Incorporated or Qualified 10/24/1997 | | |
| 2. Principal Place of Business | 2a. Mailing Ac | dress | | 4. FEI Number | Applied For | |
| 21 | 26 | · ——— | | 59-3474327 | Not Applicable | |
| Suite, Apt #, etc | Suite, Apt | #, etc. | | 5. Contificate of Status Desired | \$8.75 Additional | |
| 22 | [27] | | | | Fee Required | |
| City & State | City & Stat | e | | 6. Election Campaign Financing | \$5.00 May Be | |
| Zip Country | [28] | Cour | try | Trust Fund Contribution | Added to Fees | |
| 24 25 | #25.1 | 29 30 | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No | | |
| | of Current Registered Agen | | | 10. Name and Address of New Registers | | |
| DEAT O N, VANITA G | | | 31 Name | | | |
| 11250 OLD ST AUGUSTINE RD, SUITE 15-125 | | | 32 Street Add | ddress (F.O. Box Number is Not Acceptable) | | |
| JACKSONVILLE FL 32257 | - 1.0, 00.1.2 10 120 | [| 3 JUNE AGE | ress (F.O. Box Number is Not Noceptable) | | |
| • • • • • • • • • • • • • • • • • • • | | | 33 | | | |
| | | - | B4 City | | 85 Zip Code | |
| | | | 1 " | F | | |
| 11. Pursuant to the provisions of Section office or register 1 agent, or both in | is 607.0502 pt 607.1508, Flo i the State of Norida Such ch | onda Statutes, the ab- ange was authorized VZ 0505 Horida Statu | ove-named cor by the corpora | poration submits this statement for the purpose alion's board of directors. I hereby accept the a | of changing its registered ppointment as registered | |
| | The section of | m.osos, monen etale | (63. | | 0 | |
| SIGNATURE Signature, typed or pointed represent | registered agout and title it apply able | (NOTE: flegistored | Agent signature roqu | ured when reinstaing) DATE | | |
| | ICLES AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS A | | |
| TITLE PRSIDENT | | DELETE 11100 | F | | Change Addition | |
| NAME Vanita G. Deat | - A - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | 1.2 NAA | AE . | • | | |
| STREET ADDRESS 11658 Alexis F | | 1.3 STH | EET ADDRESS | • | ٳٞ | |
| ciry-st-zip Jacksmuile, | FL 32258 | | (-S1-7IP | | | |
| TITLE V.P. & Secretary | | DECETE 21 TITL | | | ☐ Change ☐ Addition S | |
| NAME Craig E Death | | 2 ? NAM | | • | | |
| STREET ADDRESS 11658 Alchis C | orest ur | | EET ADDRESS | | | |
| CITY-ST-ZIP Tackformile | in byle | DELETE 3.1 TITL | Y - S1 - 21P | | Change Addition | |
| TITLE NAME | L | 3.1 NAS | | | CT ANSWER CT VIOLENTI | |
| STREET ADDRESS | | | EET ADDRESS | | | |
| CITY-ST-ZIP | | | Y · \$1 - 71P | | | |
| TITLE | | DELETE 41 TIFE | | | Change Addition | |
| NAME | | 4 2 NA | ME | | | |
| STREET ADDRESS | | 43 \$18 | EE1 ADDRESS | | | |
| CITY-ST-ZIP | | 4.4 CU | r- \$1 - 21P | | | |
| TITLE | | DELETE 51 TOL | F | | Change Addition | |
| NAME | | 5.2 NAM | At | | | |
| STREET ADDRESS | | 5 3 S18 | EET ADDRESS | | | |
| CITY-ST-ZIP | | | r - ST - ZIP | | | |
| TITLE | | DECETE 6.1 THE | £ | | Change Addition | |
| NAME | | 6.5 NAV | 1 | | | |
| STREET ADDRESS | | 6.3 STR | FET ADDRESS | | | |
| CITY-ST-ZIP | | 6401 | 7 - \$1 - 71P | 440 07(0)(1) | and Mark that the Control | |
| 14. I hereby certify that the information s | supplied with this liling does n | or quality for the exer | nption stated r | Section 119.07(3)(i), Florida Statutes. I further | cermy 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 trusted 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 on an attachment without adultress.

UPZNOO