## 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** Apr 09 1998 8:00am Secretary of State

DOCUI	MENT	# P970	00098	1231 (8)							
		GATION & LAN		` '							
Principal Plac	e of Busines:		Maili	ng Address			··········		- • • • • • • • • • • • • • • • • • • •	.	
12257 DEEP (			12257 DEEP CREEK DR								
SPRING HILL	FL 34609		SPRING HILL FL 34609					DO NOT WRITE IN THIS	SONCE		
									3. Date Incorporated or Qualified	TOT AUL	
									11/05/1997		
2. Principal P	lace of Busin	0055	<u></u>	2a. Mailing Address					4. FEI Number Applied For		
Suite, Apt.	# etc		Suite, Apt. #, etc.					_	\$8.75	ot Applicable	
22	., 0.0	27	h					Certificate of Status Desired     Fee Required			
City & Stat	10	C	City & State					6. Election Campaign Financing \$5.00 May Be			
23 Zin	<del></del>	28								to Fees	
Zip 24	ŀ	Country 25	29	ıþ	30	untry			<ol> <li>This corporation owes or has paid the c Personal Property Tax due June 30.</li> </ol>		langible   ] No
		and Address of Cu		ed Agent	1001				10. Name and Address of New Registered		
JAE	BLON, JAMI	ES O				81	Name				)
12257 DEEP CREEK DR						82	82 Street A		ss (P.O. Box Number is Not Acceptable)		
SPRING HILL FL 34609						83					——-
						84 City			Fi	<b>85</b> Zip (	Code
11. Pursuant	to the provisi	ons of Sections 607	0502 and 607	1508, Florida Statu	tes, the a	above ed by	named	corpo	ration submits this statement for the purpose	of changing it	is registered
agent la			bligations of, S	_		-	i,	oraco	n's board of directors. I hereby accept the ap	90	Togration CC
SIGNATURE	Signature, based	or printed name of registere	Lagent and title if a	Denicable (NO	13500	red Ane	ni Rippalure i	required	d when reinstating) DATE	<u> 18</u>	
12.	Oldperson, typics	<del></del>	AND DIRECTO	· · · · · · · · · · · · · · · · · · ·	13.		, D. g. Later C	regarioo	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	IS IN 12
TITLE	AS P			DELETE 1.1 TITLE						Change	☐ Addition
NAME	JABLON			1.2 NA							
STREET ADDRESS		EEP CREEK DR					1.3 STREET ADDRESS				li
CITY-ST-ZIP	SPRING	HILL FL 34609		DELETE		CITY-SI TITLE	T-ZIP			Change	
TITLE NAME		TARIAL		L Deterit	1	NAME	1			El cissigo	LI Advitori
STREET ADDRESS	12257	Tablon Deep Creek	or .		1		ADDRESS				
CITY-ST-ZIP	SPRING		34609	. A			2. 4 CITY-ST-ZIP				
TITLE				DELETE	_	TITLE				Change	Addition
NAME					3.2	NAME					
STREET ADDRESS	İ				3.3	STREET	ADDRESS				
CITY-ST-ZIP	ļ			Corre	_	CITY-S	17-21P			- Chance	- Indition
TITLE				DELETE		TITLE	1			Change	☐ Addition
NAME STREET ADDRESS					•	NAME	ADDRESS				
CITY-ST-ZIP						CITY-S'	- 1				
TITLE			<del></del>	DELETE		TITLE	. 20			Change	Addition
NAME					5.2	NAME	J				
STREET ADDRESS					5.3	STREET	address				
CITY-ST-ZIP					5.4	CITY-S	T-ZIP				
TITLE				☐ DELETE		TITLE	ŀ			☐ Change	Addition
NAME						NAME					
STREET ADDRESS					- 4		ADORESS				
CITY-ST-ZIP	certify that the	e information supplie	d with this filin	g does not qualify		CITY-S		d in S	ection 119.07(3)(i), Florida Statutes. I further	certify that the	information

Indicated on this annual report or supplied with this tilling does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. 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.

SIGNATURE:

352-683-6496