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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000099417 (2)

CENTUAR - ROSE A.C.L.F. INC.

FILED Apr 15 1998 8:00am Secretary of State



Sulte, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be	Principal Plac	e of Business	Mailing Address						
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28 FLOCAS 28 FLOCAS 28 FLOCAS 29 33020 30 PACE 30 Personal Property Tax due June 30 PACE 40 Personal Property Tax due June 30 PACE 10, Name and Address of Current Registered Agent HERRY, JOAN PAULINE R 18823 NW 53RD AVE CAROL CITY FL 33055 40 PL 10 Personal Property Tax due June 30 PACE 10 PACE 10 PACE 11 Pursuant to the provisions of Socions 607 5098. Florida Salutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent are final properties agent and properties agent are final properties agent and properties agent are final properties. The purpose of changing its registered agent agent are final properties. The purpose of changing its registered agent agent are final properties. The purpose of changing its registered agent, or both, in the State of Florida Salutes. 11 Pursuant to the provisions of Socions 607 5098. Florida Salutes. 12 Street Address (P.O. Box Number Is MG Acceptable) 13 Street Address (P.O. Box Number Is MG Acceptable) 14 Part Street Address (P.O. Box Number Is MG Acceptable) 15 Street Address (P.O. Box Number Is MG Acceptable) 16 PL BS Zip Code 11 Pursuant to the purpose of changing its registered agent are final properties agent and the metalling. 12 OFFICERS AND DRICTORS 13 PL BS Zip Code 14 PL BS Zip Code 15 PL BS Zip Code 15 PL BS Zip Code 16 PL BS Zip Code 17 PL BS Zip Code 18 PL BS Zip Code 18 PL BS Zip Code 19 PL BS Zip Code 10 PL BS Zip Code 11 Pursuant to the purpose of changing its registered agent and the metalling. 15 PL BS Zip Code 16 PL BS Zip Code 17 PL BS Zip Code 18 PL BS Zip Code 19 PL BS Zip Code 19 PL BS Zip Code 10 PL BS Zip Code 10 PL BS Zip Code 11 PL BS Zip Code 11 Pursuant to the purpose of changing its registered agent and the metalling. 18 PL BS Zip Code 19 PL BS Zip Code 10 PL BS Zip Code 10 PL BS Zip Code 11 PL BS Zip Code 11 PL BS Zip Code 12 PL BS Zip Code 13 PL BS Zip Code 14 PL BS Zip Code 15 PL BS Zip Code 16 PL BS Zip Code 17 PL BS Zip Code 18 PL BS	22 Holi	MOOD	27 CAROL GTY			b. Certificate of Statos Desired	Fee P	tequired	
28 33 0 2 0 2		_					\$5.00) May Be	
STOP			1-01 0						
B. Name and Address of Current Registered Agent HENRY, JOAN PAULINE R 18823 NW 53RD AVE. CAROL CITY FL 33055 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 5502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered digent at minute with an effect of provisions of Sections 607 5502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered digent at minute with an effect of provisions of Sections 607 5502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered digent at minute with a minute w	[™] മ്റ∧ി	つ ∧	h-1 2242 A			, · · · · · · · · · · · · · · · · · · ·			
HENRY, JOAN PAULINE R 16823 NW 53RD AVE. CAROL CITY FL 33055 11. Pursuant to the provisions of Sections 607 0502 and 607 1509, Florida Statutes, the double or registered agent, or both, in the Statu of Lorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the statute of the provision's open and the originative agent and affailate with, and accept the obligations of, Section 607 0505, Florida Statutes, the double of registered agent, and the statute of the obligations of, Section 607 0505, Florida Statutes, and the statute of the obligations of, Section 607 0505, Florida Statutes, and the statute of the obligations of, Section 607 0505, Florida Statutes, and the statute of the obligations of, Section 607 0505, Florida Statutes, and the statute of the provisions board of directors. I hereby accept the appointment as registered agent and affailate the composition's board of directors. I hereby accept the appointment as registered agent and affailate the composition's board of directors. I hereby accept the appointment as registered agent and affailate the composition's board of directors. I hereby accept the appointment as registered agent and accept the composition's board of directors. I hereby accept the appointment as registered agent and accept the composition's board of directors. I hereby accept the appointment as registered agent and accept the composition's board of directors. I hereby accept the appointment as registered agent and accept the composition's board of directors. I hereby accept the appointment as registered agent and accept the appointment as registered agent and accept the composition's board of directors. I hereby accept the appointment as registered agent and accept the composition's board of directors. I hereby accept the appointment as registered agent and accept the appointment as registered agent and accept the composition's board of directors. I hereby accept the appointment as registered agent and accept	24 550		100	30] <u>U</u> F	41) C			LIPNO	
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CAROL CITY FL 33055 64									
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11. Pursuant to the provisions of Soctions 607 0502 and 607 1508. Florida Statutes, the above-named corpordium authmits this statement for the purpose of changing its 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, 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, 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, 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, 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, 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, or both, in the State of State	·	AROL CITT PL 33033		83					
11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-hamed corporation submite 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, 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, 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, or both, in the State of Agent separated when standards. Intermitted									
11. Presunt to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE				84	City	FI	85 Zip	Code	
office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the chigisplors of Science 670 5605, Florida Statutur. 12.	11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statuter	s, the abov	e-named corp	poration submits this statement for the purpose of	changing	its registered	
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12.									
TITLE	SIGNATURE	Signature, typed or printed name of registered agent.	and title it applicable. (NOTE:	Registered Ag	ent signature require	red when reinsleting) DATE		_{	
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		certify that the information supplied with	this filling does not qualify for			Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the	e 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. 117/98 Non