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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

## **FILED** Apr 23 1998 8:00am

AININ	1998		etary of State F CORPORATIONS	Secretai	ry of State
DOCU 1. Corporalio	IMENT #	700010	x0304		
RO	SEBUD INVESTMENT	rs, inc.			
Principal Plan	ce of Business	Mailing Address			
1	38 Lee Ave.	,,			
1550			Lee Ave.		
]		3230	ahassee, FL	DO NOT WRITE IN TH	IIS SPACE
		3230.	3	3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address				11/25/1997 4. FEI Number Applied For	
21	21			59.3480530	Not Applicable
·		Suite Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22					Fee Required
23		Cily & State		6. Efection Campaign Financing Trust Fund Contribution	<b>\$5.00</b> May Be
Zip	Country	Ζιρ	Country	This corporation owes or has paid the	Added to Fees
24	25	29	30	Personal Property Tax due June 30.	Current year intangible
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registers	
3	abibald r water		81 Name		
1	chibald L. Watki	LIIS	82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
1538 Lee Ave. Tallahassee, FL 32303					
10.	rianassee, fi .	32303	83		
* ( * *			84 City		85 Zip Code
11 Dureupot	to the provisions of Sections 607.00	(12 and CO2 1609 Florida Ctat	ulso the share served as	rporation submits this statement for the purpose	' <b>L</b>   '
e office or r	edi <b>ster</b> ed agent, or both, in the Stat	e of Florida, Such change was	s authorized by the corpor	riporation submits this statement for the purpose ation's board of directors. I hereby accept the a	e of changing its registered pointment as registered
	m familiar with, and accept the obli	gations of, Section 607.050 <b>5,</b> <del>1</del>	Florida Statutes.		
SIGNATURE	Signature typical or heated manusof registered a	gertand the damph cable (No	Olf Registered Agent signature rec	pured when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PRESIDENT	☐ DLIËTE	11 TALE		Change Addition
NAME	Suzanne T. Wat	kins	12 NAME		7
STREET ADORESS	<sup>88</sup> 1538 Lee Ave.		1.3 STREET ADDRESS	1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	Tallahassee, I	L 32303	1.4 CITY - ST - ZIP		
NAME	Vice President	:/Secretary	2.1 THLE		☐ Change ☐ Addition C
STREET ADORESS	Archibald L. W	latkins -	2 2 NAME		
CITY-ST-ZIP	<b>1538 Lee Ave.</b>		2 3 STREET ADDRESS 2 4 CITY - ST - 7/P		
TITLE	Tallahassee, F	L 3230 DEFETE	3.1 11111		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			34 City ST-ZIP		
TITLE		☐ DOLETE	4 1 75TLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<del></del>	Think to	4.4 CITY - ST - ZIP	party grading granty courts court to the court	
TITLE		☐ DELETE	51 TITLE	<b>800002499</b> -04/24/9801025-	1 □ 3 Addition □ Addition
NAME STREET ADDRESS			5.2 NAME	~94/24/38~~01025- ***150.00	U15
CITY-ST-ZIP			5 3 STREET ADORESS	本本本文()(1.1.11)	
TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME		,	6.2 NAME		Y C Margin M
STREET ADDRESS			6.3 STREET ADDRESS		1/12
0.71 07 70			1		14.02

64 CITY-\$1-ZIP

14. Thereby 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 around report or supplemental amount leport 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, or on an attachment with an address.

4-17-98 (FS6) 224-5513