

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

FILED

Feb 10 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000102777 (4)

1. Corporation Name  
A BETTER SOLUTION, INC.



Principal Place of Business  
6093 CLARK CENTER AVE.  
SARASOTA FL 34238

Mailing Address  
6093 CLARK CENTER AVE.  
SARASOTA FL 34238

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
12/04/1997

2. Principal Place of Business

21 807E U.S. 41 Bypass S.

Suite, Apt. #, etc.

22 Suite E

City & State

23 Venice, Florida

Zip

24 34292

Country

25 Sarasota

2a. Mailing Address

26 807E U.S. 41 Bypass S.

Suite, Apt. #, etc.

27 Suite E

City & State

28 Venice, Florida

Zip

29 34292

Country

30 Sarasota

4. FEI Number

65-0799092

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SHARFF, MARK J  
6093 CLARK CENTER AVE.  
SARASOTA FL 34238

10. Name and Address of New Registered Agent

81 Name

Carol L. Childers

82 Street Address (P.O. Box Number is Not Acceptable)

807E U.S. 41 Bypass South

83

84 City

Venice

FL

85 Zip Code

34292

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

*Carol L. Childers*

Carol L. Childers, President

2/6/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

DP

NAME

CHILDERS, CAROL

STREET ADDRESS

6093 CLARK CENTER AVE.

CITY-ST-ZIP

SARASOTA FL 34238

TITLE

DVP

NAME

SHARFF, MARK J

STREET ADDRESS

6093 CLARK CENTER AVE.

CITY-ST-ZIP

SARASOTA FL 34238

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

DP

1.2 NAME

Childers, Carol

1.3 STREET ADDRESS

807E U.S. 41 Bypass South

1.4 CITY-ST-ZIP

Venice, Florida 34292

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I hereby 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 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:

*Carol L. Childers*

Carol L. Childers

2/6/98

(941) 480-9191

CR2E034 (10/97)