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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000104368 (0)

FILED Feb 20 1998 8:00am Secretary of State

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| TAMPA FL 33606 TAMPA FL 33606 TAMPA FL 33606 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/17/1997 2. Principal Place of Business 21 SVI 1 So. Bay34H July Not A Sulle, Apt. #, etc. Sulte, Apt | Not Applicable 5 Additional a Required 00 May Be led to Fees r Initial Bulle LI No Zip Code ag its registered t as registered |
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| Trust Fund Contribution | zip Code ng its registered tas registered |
| ZIP Country ZIP Country ZIP Country 8. This corporation owes or has paid the current year in the personal Property Tax due June 30. Yes 20 Yes | Zip Code ng its registered t as registered |
| 9. Name and Address of Current Registered Agent ABEL, JOHN P JR 27 ADALIA TAMPA FL 33606 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 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 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 and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I 1.7 ITILE NAME ABEL, JOHN P 1.2 NAME SIRRET ADDRESS CITY-ST-2IP TITLE 1.3 SIRRET ADDRESS CITY-ST-2IP TAMPA FL 33606 1.4 CITY-ST-2IP Change Cha | Zip Code rig its registered t as registered |
| 9. Name and Address of Current Registered Agent ABEL, JOHN P JR 27 ADALIA TAMPA FL 33606 82 Street Address (P.O. Box Number is Not Acceptable) 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 red 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 regard. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature. Signature. Signature. Signature. Signature byte or printed name of registered agent end life if applicable (NOTE: Registered Agent signature required when refiniteing) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE DAME ABEL, JOHN P 1.2 NAME SIREET ADDRESS 27 ADALIA 1.3 STREET ADDRESS CITY-S1-2IP TAMPA FL 33606 1.4 CITY-S1-2IP ITILE Change Change | Zip Code ng its registered t as registered |
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| 27 ADALIA TAMPA FL 33606 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Cor 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 red agent. I arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TITLE Change Cha | ng its registered t as registered |
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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 can extract the anaderess.

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