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

PROFIT CORPORATION ANNUAL REPORT

1998

SOLBERGER, JACK

MOBILE, AL 36609

ONE OFFICE PARK, STE. 101

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 13 1998 8:00am

Secretary of State

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97 600106337

1. Corporatio	n Name				
EQU:	ITY INVESTORS GENER	AL PARTNER, INC.	•		11 of \$10 13 miles
Principal Place of Business Mailing Address					The state of the s
5021 HWY 98 EAST SUITE 300 DESTIN FL 32541		PO BOX 16167 MOBILE AL 36608 US	,		DO NOT WRITE IN THIS SPACE
US					3. Date Incorporated or Qualified 12/18/97
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For 63–1189874 Applied For Not Applicab
Suite, Apt. #, etc.		Suite, Apt. #, etc.		•	5. Certificate of Status Desired S8.75 Additional Fee Regulied
City & Stato		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 4	Country 25	Zip 3	Country	y	8. This corporation owes or has paid the current year intengible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
ROB BLUE, JR.			82	A toost2	Address (P.O. Box Number is Not Acceptable)
221 MCKENZIE AVENUE			"-		the section of the se
PANAMA	CITY, FL 32401		83		
•.			84	"	FL 85 Zip Code
11. Pursuant office or r agent. La	to the provisions of Sactions 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	02 and 607.1508, Florida Statutes e of Florida. Such change was au pations of, Section 607.0505, Flori	s, the abov thorized b ida Statule	e-named o y the corpo s.	corporation submits this statement for the purpose of changing its registere poration's board of directors. I horeby accept the appointment as registered
SIGNATURE		•			
			Hagistarad Ap	icul signature r	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
ITLE	OFFICENS AF	DELETE	1.1 TITLE	т	Change Additional Additions and Discordance Additional
AME .	BURTON, J. ROE		1.2 NAME		enter Ottorigo Brand Producti
STREET ADDRESS	165 N. BELTLINE HWY		.,	T ADDRESS	
	MADILE AL		1.4 CITY -:		
CITY-ST-ZIP			2.1 TITLE	OI-CIF	☐ Change ☐ Addill
IAME	MARX, JULIEN E.	221		ì	
STREET ADORESS	165 N. BELTLINE HWY			T ADDRESS	•
HY-ST-ZIP	MOBILE AL			ST-ZIP	
HILE	D	DELETE	3.1 TITLE	01.FIF	Change Addit
NAME	MINON CTCOUCH W		3.2 NAME	j	
	464 ALDELTIME DIAW			T ADDRESS	
STREET ADDRESS	MOBILE AL			- 1	
CITY-ST-ZIP	myore as	DELETE	3.4, CITY- 4.1 TITLE	21-71h	☐ Change ☐ Addil
TAILE	_	L DOCCIE	9,1 HILE	- 1	C outile C vou

CITY-ST-ZIP

6.4 CITY-ST-ZIP

***150.00

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 and made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter Statutes and that my name appears in the same control that the information of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter Statutes.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP