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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Merthamy

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 12 1998 8:00am Secretary of State

•	1998	DIVISION OF CO	RPORATIONS	- 1. · · · · · · · · · · · · · · · · · ·		
	MENT # P9700 BLIC ARABIANS, INC.	0107466 (9)			NO DING BIN 1821	
					<u> </u>	
Principal Place of Business Mailing Address					.18 01110 0111 1001	
20830 HUNTER HILL DRIVE 20830 HUNTER HILL DRIVE TRILBY FL 33583 TRILBY FL 33583			Ĭ.	DO NOT WRITE IN THIS SPACE		
•				3. Date Incorporated or Qualified		
				12/18/1997		
-	Place of Business	2a. Mailing Address	ssional F	4. FEI Number	Applied For	
Suite, Apt.	# Atc	26 1140 PTOTE	DOING T		Not Applicable 5 Additional	
22	w, 610.	27		1 6 Certificate of Status Desired	e Required	
City & Stat	е	City & State		Election Campaign Financing \$5.	00 May Be	
23		28 Tampa, F	•		led to Fees	
Zip	Country	^{Zip} 33637 3	Country	8. This corporation owes or has paid the current year		
24	25) 9. Name and Address of Currer		0 45A	Personal Property Tax due June 30. Yes	∐ No	
MCIVER, RICHARD S				10' matte and Wastese Cities (188) and 18 About		
WK400 HODORO D.4			00 (0)	Address (D.O. Day March and Mark Association		
1505 N. FLORIDA AVENUE			62 Street	82 Street Address (P.O. Box Number is Not Acceptable)		
TAMPA FL 33602			83			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			84 City	ema 86	Zip Code	
			1 1 7	FL T	,	
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. La	am familiar with, and accept the oblig	ations of, Section 607,0505, Florid	da Statutes.	,		
SIGNATURE	Signature, typed or printed harvie of rugistered age	cul and litio it applicable (NOTE F	Registered Agent signature	required when reinstating) DATE		
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	TORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Char	ge Addition S	
NAME	WESTLAKE, CANDACE		1.2 NAME	No street address -	5	
STREET ADDRESS	P.O. BOX 809 N/A		1.3 STREET ADDRESS	mail not delivered to physica	. Addred	
CITY-ST-ZIP	TRILBY FL 33593 '	Delete	1.4 CITY-ST-ZIP			
TITLE	D ARSENAULT, DONNA	L) DELETE	2.1 TETLE	No street Address	ge (Abertion C	
NAME STREET ADDRESS	P.O. BOX 809 N A		2.2 NAME 2.3 Street Address			
CITY+ST-ZIP	TRILBY FL 33593		2.4 CITY-ST-ZIP	Hail not delivered tophysica	al Address	
TITLE	D	DELETE	3.1 TITLE	LF Chan	ge Addition	
NAME	GAY, LISA	!	3.2 NAME	Dancer Oal	1	
STREET ADDRESS	P.O. BOX 28		3 3 STREET ADDRESS	1013 W. Dossey Rd.		
CITY-ST-ZIP	LAKELAND FL 33802		3.4. CITY - ST - ZIP	Lakeland, Florida 33811		
TATLE	·	☐ DELETE	4.1 TITLE	, Chan	ge L Addition	
NAME	·	ı	4.2 NAME]	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Chan	ge Addition	
NAME	1		5.2 NAME		5.0	
STREET ADDRESS			5.3 STREET ADDRESS		-2113	
CITY+ST-7IP			5.4 CITY - ST - ZIP		7	
TITLE		DELETE	6.1 TITLE	90000245553 9 -03/12/9801034022	ge Addition	
NAME			6.2 NAME	-03/12/9801034022		
STREET ADDRESS			6.3 STREET ADDRESS	***158.75	•	
CITY-ST-ZIP	partify that the information supplied w	ith this filing does not qualify for t	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i). Florida Statutes. I further certify that	the information	
· max. I HIG(BUT) (no ana mina usea not uuminy liif 1		re in position i reserrenti. I fonda piatotes. I fulliter certify mai	and maderial and the first	

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 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.

CICNIATUDE.

A. 11. 1998 (352)583-5593