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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

S09200

(4)

N/C 2.3.98

## FILED Apr 15 1998 8:00am Secretary of State

Robert D. Glaser,		er, Ph.U,	P. 74.			
Principal Place of	f Business	Mailing Ad	dress			
1509 W SWANN AVE SUITE 280 TAMPA FL 33606		1509 W S SUITE 280	SWANN AVE			
		TAMPA FL	33606		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
. Principal Place	of Business	2a. Mailing	Addrose		10/26/1990 4. FEI Number	Applical For
, Frincipar Flaoi	e of pusitiess	<del></del>	Addiess			Applied For Not Applicate
Suite, Apt. #, r	elc.	26 Suite. A	hpt. #, etc.		59-3037655	\$8.75 Additional
	210.	27	.,		5. Certificate of Status Desired	Fee Required
City & State		City & S	State		6. Election Campaign Financing	\$5.00 May Be
		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip		Country	8. This corporation owes or has paid the c	
]	25	29		30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Cu	ırrent Registered Aç	gent		10. Name and Address of New Registered	d Agent
GLASI	<b>e</b> r, robert d.			81 Name		
1509 W SWANN AVE., #280			82 Street Ac		idress (P.O. Box Number is Not Acceptable)	
TAMPA	A FL 33606					
				83		
				84 City		85 Zip Code
				'   ' '	F	L     `
office or regi	the provisions of Sections 607 istered agent or by 11, in 16	050, and 607 1508; state Florida Saon	Florida Statu change was	ites, the above-named cor authorized by the corpora	poration submits this statement for the purpose ition's board of directors. I hereby accept the ap	ppointinent as registered
agent. I am f	familiar with and coop the c	obligations of Section	1 <b>/</b> 07 <b>.050</b> 5, F	lorida Statutes.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
IGNATURE	14.4.1	ob sufficients of section of agent and the it appears and the it appears	4	lorida Statutes.	4-8	-48
SIGNATURE SIGN	nature (i) Marinia Hana at regis	M-741	(NK		4-8	ND DIRECTORS IN 12
SIGNATURE SIGNATURE	OFFICERS	of agent and sile if an area of a AND DIRECTORS	4	OIL Registered Agent signature requ	Fred when reinstating) DATE	-48
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