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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Stale DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

(3)

COSCRAY ENTERPRISES INC

Principal Place of Business	Mailing Address	
PO BOX 6875 CLEARWATER FL 34618	PO BOX 6875 CLEARWATER FL 34618	
		3.
2. Principal Place of Business	2a. Mailing Address	4.
1	26	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

FILED Apr 21 1998 8:00am Secretary of State

OOSGRAT ENTERFRIBES, INC.										
Principal Plac	ce of Business		Mailing	g Address					DII GIBIL DIĞİL	81811 9181 1 1881
PO BOX 687				OX 6875						
CLEARWATER FL 34618		CLEARWATER FL 34618					DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualified	O O NOL	
								12/05/1990		
2. Principal F	Place of Busine	085	2a. Ma	iling Address				4. FEI Number		Applied For
21			[26]					59-3040923		Not Applicab
Suite, Apt.	, #, etc.		} 1	ite, Apt. #, etc.				5. Certificate of Status Desired	, -	5 Additional
22	10		27	P Ctote						Required
City & Stat	HO		F1	y & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip		Country	28 		Cou	ntrv	,	8. This corporation owes or has paid the c		
337	7.5%	25		33758	30	,		Personal Property Tax due June 30.	Yes	□ No
<u> </u>		and Address of Currer			1001			10. Name and Address of New Registere	Agent	
FL	JNK, RICHAP	ID B.				81	Name			
	120 DREW S1					82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	EARWATER							,	, <u>.</u>	
						83				
					ļ	84	City		85 Z	ip Code
								F	┖╸│ │ ゜	33765
11. Pursuant office or	I to the provision registered ago	ons of Sections 607.050 ant or both, in the State)2 and 607.1 : af Florida S	508, Florida Sta Such change wa	atutes, the al	oovo vd b	p-named corp the corporat	poration submits this statement for the purpose tion's board of directors. I horeby accept the ap	of changin pointment	g its registere as registered
agent. I a	am familiar will	n, and accept the oblig	ations of, Se	ction 607.0505,	Florida Stat	utes	3.		,	
SIGNATURE		And the second			Della Francisco			red when reinslating) DATE		
12.	Signature, typica o	r printed name of registers Lag OFFICERS AN	and the second of the second		13.	1 vae	nt signature redoir	red when reinslating) DATE ADDITIONS/CHANGES TO OFFICERS AF	VD DIRECT	ORS IN 12
TITLE	DP			DELETE	1.1 TI	ile		The strategy of the strategy o	☐ Chang	
NAME	COSGRA	Y, WILLIAM R JR			1.2 N/	ME.				
STREET ADDRESS	2120 DR				13 S1	REET	ADDRESS			
CITY-ST-ZIP	CLEARW	ATER FL			1.4 CT	1Y-S	7-20P			
TITLE	DV			DELETE	2170	ILE			Chang	e Additio
NAME	FUNK, R	ICHARD BRADLEY			2.2 NA	MŁ				
STREET ADDRESS	2120 DR				2.3 ST	REE]	ADDRESS			
CITY-ST-ZIP	CLEARW	ATER FL			2. 4 C	ijγ. <u>\$</u>	S1-ZIP			
TITLE	ST			L DECE 1€	3.1111	l (E	-		L Chang	je [] Additio
NAME		N, JOHN C.			3.2 NA					
STREET ADDRESS	2120 DRI						ADDRESS			
CITY-ST-ZIP	CLEARW	AIEK FL		TT box or	3.4 C		ST · ZIP		Chan	n Talani.
TATLE				[] DELETE	4.1 Til				L Chang	ge L Additio
NAME OTOTET ADDOCAGO					4. 2 N		4DDDEGG			
STREET ADDRESS							ADDRESS			
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NAME				hand Latterit	5.2 NA				O-10119	
STREET ADDRESS					3.2 NF	uYIE	- 1			
CITY-ST-ZIP	1				1971	oct.	Annaree 1			
0111-91-2IP							ADDRESS			
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NAME				DELETE	5.4 CI 6.1 TIT 6.2 NA	IY-S LF ME	T - ZIP		Chang	e Additio
				☐ DELETE	5.4 CI 6.1 TIT 6.2 NA	TY+S TLF .M! REET	T-ZIP ADDRESS		Chang	e Additio

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.

46/4/10