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

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** #

(6)

**FILED** Feb 17 1998 8:00am Secretary of State

OTUA	SUPER-SERVICE CENTER,	INC.			21211 21211 21211 21211 21211 1221
Principal Plac	ce of Business	Mailing Address	<del></del>	{ I (BD)(D)O SIG INODY BYIYO (BYI) (BBDD YU), OJOJI	BKOKI BLOKI BIDIN BLOKI BKOK LODI
401 E. VIRGINIA ST. 401 E. VIRGINIA ST.					
TALLAHASSEE FL 32301 TALLAHASSEE FL 32301			l	1	
1				DO NOT WRITE IN TH	IS SPACE
ļ				3. Date Incorporated or Qualified	1
L		- 1 A-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	· · · · · · · · · · · · · · · · · · ·	01/18/1991	<del></del>
<del></del>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# oto	26 Suite, Apt. #, etc.		59-3046647	Not Applicable  \$8.75 Additional
22 27		<b></b>		6. Certificate of Status Desired	Fee Required
City & Stal	le	City & State	<del></del>	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
<b></b>	9, Name and Address of Currer	nt Registered Agent		10. Name and Address of New Register	ed Agent
	AY, EARL F.		B1 Name		[
401 E. VIRGINIA ST.			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
1 1/	ALLAHASSEE FL 32301				
1			63		
]			84 City		85 Zip Code
<u> </u>				F	
office or i	to the provisions of Sections 607.056 registered agent, or both, in the State	72 and 607.1508, Florida Statut Fof Florida, Such change was a	es, the above-named corp authorized by the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	or changing its registered population
agent La	am familiar with, and accept the oblig	alions of, Section 607.0506, Fi	orida Statutes.	• •	``
SIGNATURE					
12.	Signature, typed or proted name of regulered age OFFICERS AN	D DIRECTORS (NO.)	E Registered Agent signature require  13.	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP CHARLES	DELETE	1.1 TITLE	ADDITIONAL OF THE COLOR	Change Addition
NAME	MAY, EARL F.		1,2 NAME		
STREET ADDRESS	3208 PROUD CLARION TRA	L	1.3 STREET ADORESS		
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-ST-ZIP		
TITLE	DV	DELETE	2.1 TITLE		Change Addition
NAME	HACKNEY, CHRIS T.		2 2 NAME		Į
STREET ADDRESS	3835 INDIAN MOUNDS RD.		2.3 STREET ADDRESS		İ
CITY-ST-ZIP	TALLAHASSEE FL		2. 4 CITY - ST - ZIP		
TITLE	DS	DELETE	31 TITLE		☐ Change ☐ Addition
NAME	LEWIS, JOHN R.	.,	3.2 NAME		Į
STREET ADDRESS	4501 ROCKBRIDGE HOLLOV	V	3.3 STREET ADDRESS		ſ
City-St-ZiP	TALLAHASSEE FL	Daniero	3 4. CITY-ST-ZIP		T Alexander
TITLE	D. DOLLOLAG N	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	BEHRMAN, DOUGLAS N.		. 4. 2 NAME		
STREET ADDRESS	2191 MILLER LANDING RD.		4.3 STREET AODRESS		ļ
CITY-ST-ZIP	TALLAHASSEE FL	DELETE	4.4 CITY - ST - ZIP		☐ Change ☐ Addition
NAME	}	L.J DELETE	5 1 TITLE		T custings (T) vocation
NAME PARCEY ADDRESS			5.2 NAME		}
STREET ADDRESS			5.3 STREET ADDRESS		į
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-SI-ZIP 6.1 TITLE		Change Addition
NAME		C officit	6.1 TILLE		The Asserted The Control of the Cont
	1		and the second second		ļ
STREET ADDRESS			63 STREET ADDRESS		İ
CITY-ST-ZIP	L		6.4 CITY-ST-ZIP		

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 a contract of the corporation of the corporation of the receiver of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the

SIGNATURE: