## 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 #

(8)

BAJOCZKY & FOURNIER, P.A.

**FILED** May 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									a idalidad inn teleb tent deleb tent	011 E1E11 91011 91911 0	411 41411		
125 N. FRANKLIN BLVD. P.O. BOX 2													
TALLAHASSEE FL 32301				1	TALLAHASSEE. FL 32302				DO NOT WRITE IN THIS SPACE				
									3. Date Incorporated or Qualified	114 11110 01 700	•		
									02/22/1991				
2. P	Principal Pla	ace of Busin	noss	2a.	Mailing Address		-		4. FEI Number	· Т	Apr	lied For	
_	21				26				59-3050537	F	Not Applicable		
	Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$8	.75 A	ditional	
22					27				6. Certificate of Status Desired	F	ee Rec	ulred	
City & State					City & State				6. Election Campaign Financing			Aay Be	
23				28					Trust Fund Contribution		ded to		
	ip.		Country	-	Zıp	<del></del>	untry		8. This corporation owes or has pa				
24		25 29 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No  10, Name and Address of New Registered Agent							
	DA		WITHONY L.	telli Heğisi	GIOD ANGUE		81	Name	IV. Hand and readless of rest in	-gistoites rigoin			
							82						
125 N. FRANKLIN TALLAHASSEE FL 32301								Street Add	ress (P.O. Box Number is Not Acceptal	ole)			
							83						
								0.1		la-l	Zin C		
							84	City		FL 85	Zip C	ode	
11.	Pursuant to	o the provis	ions of Sections 607.0	0502 and 60	07.1508, Florida Statut	tes, the a	above	e-named cor	poration submits this statement for the particles board of directors. I hereby access	ourpose of chang	ging its	registered egistered	
	agent. I an	n familiar wi	th, and accept the of	oligations of	Section 607.0505, FI	orida Sta	itutes	s.	tion's board of directors. I hereby acce	p. t. to department			
SIGN	NATURE _					· · · · · · · · · · · · · · · · · · ·	4		ired when reinstating)	DATE			
Signature, typed or printed name of registered age.  OFFICERS ANI							in signature radu	ADDITIONS/CHANGES TO OFFI		CTORS	IN 12		
TITLE		PD	0,020	, and Danie	DELETE	1.1 1				☐ CF		Addition	
NAME	- 1	BAJOC	ZKY, ANTHONY L.			1.21	NAME						
STREE	ET ADDRESS	125 N.	FRANKLIN			1.3 9	STREET	ADDRESS					
CITY-	ST-ZIP	TALLAH	iassee fl			1.40	CITY-S	T-ZIP				;	
TITLE		VPD			DELETE	2.17	ITLE			[ ] Ci	ange	Addition	
NAME	:		IER, PATRICIA			2.21	CABAC	1			•		
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Floride Statutes. I further certify that the informatio indicated on this annual report or supplemental arrural 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 empelwered 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 attriphment with an address.

4/17/98 850/222-3399