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 # S60129

(1)

ERICK DAVID LAND CORP.

FILED Jan 27 1998 8:00am Secretary of State

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| Principal Place of Business Mailing Address | | | | | | (4) 6.6((6.2) 415() 415() 415() |
| 1831 NORTH BELCHER ROAD 1831 NORTH BELCHER ROAD | | | | | | |
| SUITE G-3 CLEARWATER FL-84835 33765 | | SUITE G-3 CLEARWATER FL 20005- 33765 | | DO NOT WRITE IN THIS SPACE | | |
| OCEANNAIEN | 33703 | OCCARTATED TO STATE STAT | | 3. Date Incorporated or Qualified | | |
| | | | | | 06/13/1991 | |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | <u> </u> | | 4. FEI Number | Applied For |
| 21 | | 26 | | | 59-3104163 | Not Applicable |
| Sulte, Apt | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | | Fee Required | |
| City & State | • | City & State | | 6. Election Campaign Financing | \$5.00 May Be | |
| 23 Zip | Country | Zip | Count | ··· | Trust Fund Contribution | Added to Fees |
| _ | Country 25 | 29 | 30 | у | This corporation owes or has paid the of Personal Property Tax due June 30. | current year Intangible |
| 24 | g. Name and Address of Current | | 1301 | | 10. Name and Address of New Registere | |
| LIAI | MMOND, JAMES M. ESQUIRE | | 8 | 1 Name | | |
| | IN BELCHER RD #A-1 | | 8: | <u> </u> | Les (D.O. De Nigeles in New Assessed in New As | |
| SHIPS SEE | | | | 2 Street Add | fress (P.O. Box Number is Not Acceptable) | |
| CLEARWATER FL SAGES 33765 | | | | 3 | | |
| - OL | CALIFORNIE COMPANY | | <u> </u> | 1 00 | | las I din Onda |
| | | | 84 | 4 City | F | 85 Zip Code |
| 11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-pamed 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | |
| SIGNATURE | | | | | | |
| Signature, typed or printed name of registered agent and lifte if applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | |
| 12. | OFFICERS AND | | 13. | · · · · · · · · · · · · · · · · · · · | ADDITIONS/CHANGES TO OFFICERS A | |
| TITLE | PCD MANAGE MANAGE M | ☐ DELETE | 1.1 TITLE | | | Change Addition |
| NAME | KRIVACS, JAMES K | | 1.2 NAME | | | |
| STREET ADDRESS | 1831 N BELCHER RD G3 | | | et address | | |
| CITY-ST-ZIP | CLEARWATER FL 3376 | DELETE | 1.4 CITY - 2.1 TITLE | | | Change Addition |
| TITLE | | | 2.2 NAME | | | |
| NAME CTOSET ADDRESS | | | | ET ADDRESS | | |
| STREET ADDRESS | | | 2.4 CITY | | • | |
| TITLE | | DELETE | 3.1 TITLE | | | Change Addition |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | | E1 ADDRESS | | |
| CITY-ST-ZIP | | | 3.4. CITY | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | Change Addition |
| NAME | | | 4. 2 NAM | E | | |
| STREET ADDRESS | | | 4.3 STREE | ET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY - | ST-ZIP | | |
| TITLE | | ☐ DELET E | 5.1 TITLE | | | Change Addition |
| NAME | | | 5.2 NAME | | | |
| STREET ADDRESS | | | 5.3 STREE | 1 Address | | |
| CITY-ST-ZIP | | | 5.4 CITY- | ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STREE | ET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY | ST-ZIP | | |
| | | | | | . Cantina 440 07/01/11 Cincida Cintuina I fuebar | |

14. I hereby 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.

JAMES K. KRIVACS TIMES & MILLIBER 1-19-98813/791-7556