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

FILED Mar 02 1998 8:00am Secretary of State

Principal Place of Business 8359 SANDLER RD JACKSONVILLE FL 32244 US (2) Mailing Address 9359 SANDLER RD JACKSONVILLE FL 32244 US					****	DO NOT WRITE IN THIS SPACE			
					•		3. Date Incorporated or Qualified		
6 Diani- 10			1.65	***************************************			10/15/1991		
2. Principal Place of Business			28. Mailing Address				4. FEI Number 59-3088613	1 	oplied For ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc. 27 City & State			SR 75 Additions			
City & State						27	Certificate of Status Desired		
						28			
Zip	Т	Country		Zip	Country	,	8. This corporation owes or has paid the		
24	25		29		30		Personal Property Tax due June 30.		□No
-		d Address of Cu	urrent Regist	lered Agent	81	Name	10. Name and Address of New Registers	ed Agent	
	IITH, JACK A. 59 SANDLER					1		<u> </u>	
JACKSONVILLE FL 32244					82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
•					83				·····
					<u> </u>	ļ <u>.</u>		. 85 Zip	Code
					84	I City	Exist.		
11. Pursuant t	o the provisions	s of Sections 607	7.0502 and 60	07.1508, Florida S			poration submits this statement for the purpose	L	ts registered
SIGNATURE					Statutes, the above was authorized by 5, Florida Statute	e-named corr y the corporal s.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	e of changing it appointment as	ts registered registered
SIGNATURE		rinted name of registers		II applicable CTORS	Statutes, the abovewas authorized by 5, Florida Statute: (NOTE Registered Age 13.	e-named corr y the corporal s.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	e of changing in appointment as	RS IN 12
SIGNATURE 12. TITLE	Signature, typed or p	of FICERS	ed agent and title	II applicable	Statutes, the abovewas authorized by 5, Florida Statute: (NOTE Registered Age 13. E 1.1 TITLE	e-named corr y the corporal s.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a red when reinstating) DATE	e of changing it appointment as	
SIGNATURE 12. TITLE NAME	Signature typed or n D SMITH, JA	OFFICERS	ed agent and title	II applicable CTORS	Statutes, the above was authorized by 5, Florida Statute: (NOTE Registered April 13. E 1.1 TITLE 12 NAME	e-named corporal y the corporal s.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a red when reinstating) DATE	e of changing in appointment as	RS IN 12
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SIGNATURE 12. TITLE NAME	Signature typed or n D SMITH, JA	OFFICERS OCK A. DLER RD	ed agent and title	II applicable CTORS	Statutes, the above was authorized by 15, Florida Statute: (NOTE Registered Agents) 13. E 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S	e-named corp y the corporal s.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a red when reinstating) DATE	e of changing in appointment as	RS IN 12
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Indicated on this annual report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report or supplied with this filling 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 of on an attachment with an address.

SIGNATURE:

2-24-98

904-7788985