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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

111

FILED Apr 15 1998 8:00am Secretary of State

	T.M. M	Name ANAGEM	ENT	r, INC.) Z	(4)				
Prin	cipal Place	of Busines	S			ailing Address				
ì	•	UN SOUTH				2892 DEER RUN SOUTH	1			
CLEARWATER FL 34821 CLEARWATER FL 34621										DO HOT WOITE IN THE ODLOG
US	US US									DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
										11/21/1991
2. F	2. Principal Place of Business 2a. Mailing Address									4. FEI Number , Applied For
21	•				26	26				59-3093748 Not Applicable
- 8	uite, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional	
22					27					5. Certificate or status Desired Fee Required
	ity & State	•				City & State				6. Election Campaign Financing \$5.00 May Be
23	•		· · ·		28	-	1 6 :-			Trust Fund Contribution
	ip タタフ				Cour	ntry	<i>'</i>	8. This corporation owes or has paid the current year Intangible		
24	221		25	Address of Curre	29	tered Agent	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	ME	RRELL, JU			THE STATE OF THE S			81	Name	IV, Hallo alla rasioso er rasi i logisto da rigoli.
							1	_		
	2892 DEER RUN S. CLEARWATER FL 34621							82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
	VLL			01021			t	83		
							Ì			
								84	City	FL 85 Zip Code
	NATURE _									corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
12.	······	Signature types	Or first	OFFICERS A			13.	Age	ont signature rac	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		PS		317102.1076	117 171110	DELETE	1.1 10	LE	T	Change Addition
NAME		MERRE	L. 1	HOMAS L			1.2 NA	ME]	
STREE	T ADDRESS			RUN SOUTH			1.3 STI	REET	ADDRESS	
CITY-	ST-ZIP	CLEARY	VATI	ER FL			1.4 CiT	Y-\$	it-ZIP	
TITLE		VPT				DELETE 2.1 TI				☐ Change ☐ Addition
NAME		MERRELL, JUDY			2.2 NA		ME	- 1		
STREE	T ADDRESS			RUN SOUTH			2.3 STI	REFT	ADDRESS	
	ST-ZIP	CLEARY	VATI	ER FL	 -			_	ST - ZIP	
TITLE							3.1 TITLE		Change Addition	
NAME							3.2 NA			
	TADORESS						1		ADDRESS	
	ST-ZIP					DELETE	3.4, Ci		ST-ZIP	☐ Change ☐ Addition
NAME	}					L DELETE	4.1 III 4.2 NA		}	Orionge Maulituti
	T ADDRESS								ADDRESS	
	ST-ZIP						4.4 CIT			
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NAME	1					_	5.2 NA		1	_ ;
	T ADDRESS								ADDRESS	
	ST-ZIP						5.4 CIT		ì	
TITLE				<u> </u>		DELETE	6.1 TIT			Change Addition
NAME	1						6.2 NA	ME	}	
STREE	T ADDRESS						6.3 STF	REET.	ADDRESS	
CITY-	ST-ZIP						6.4 CIT	Y-51	T-ZIP	

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 of 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 changes, of an an attachment with an address.