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

**PROFIT** CORPORATION ANNUAL REPORT

1998

**DOCUMENT #** 

SPIRIT SALES SEARCH INC.

(5)

## FILED FLORIDA DEPARTMENT OF STATE Mar 23 1998 8:00am Sandra B. Mortham Secretary of State Secretary of State DIVISION OF CORPORATIONS



Principal Place of Business Mailing Address 1750 E. OAK KNOLL CIRCLE 1750 E. OAK KNOLL CIRCLE FORT LAUDERDALE FL 33324 FORT LAUDERDALE FL 33324 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/17/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0310336 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired  $\Box$ 22 Fee Required 27 City & State City & State 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 Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GALLAGHER, JUNE E 1750 EAST OAK KNOLL CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33324 83 City Zip Code 85 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named 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 title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change GALLAGHER, JUNE E NAME 1.2 NAME 1750 EAST OAK KNOLL CIR. STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE ☐ Change Addition 2.1 TITLE GALLAGHER, FRANK E NAME 2.2 NAME 1750 EAST OAK KNOLL CIR. STREET ADDRESS 2.3 STREET ADDRESS FORT LAUDERDALE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADORESS CITY-ST-ZIP 3.4. CITY-\$1-ZIP DELETE TITLE ☐ Change ☐ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE □ DELETE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS City-St-2IP 6.4 CITY-ST-ZIP

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 attagrigment with an address.

QUUUNE E. BALLACHER 3 SIGNATURE: