SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

CHARLES G. BURR, P.A.

FILED Jul 29 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				-{	
442 W. KENNED		442 W. KENNEDY BLVD.					
SUITE 300		SUITE 300					
TAMPA FL 3360	6	TAMPA FL 33606				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 03/03/1992	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For	
21	·	26				59-3108887 Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · · ·	5 Contificate of Status Desired \$8.75 Additional	
22	·	27				Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
Zia Country		Zip Country			Trust Fund Contribution		
Zip Country		29 30		ниу		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24 25 29 29 9. Name and Address of Current Registered Agent			130]	10. Name and Address of New Registered Agent			
BURR, CHARLES G.					81 Name		
442 W. KENNEDY BLVD.					Chroat Addre	diana (D.O. Day Mumbas in Nick Associable)	
	E 300		82		Street Addre	ss (P.O. Box Number is Not Acceptable)	
	PA FL 33606			83			
				84	City	85 Zip Code	
					•		
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 bite if applicable. (NOTE: Registere					jent signature requir	red when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	L DELETE	1.1 TI	ΓLE		Change Addition	
NAME BURR, CHARLES G.			1.2 NAME				
STREET ADDRESS 442 W KENNEDY BLVD #300				REET	ADDRESS		
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP		ZIP		
TITLE	C Detter			21 TITLE 22 NAME		L Change L Addition	
NAME							
STREET ADDRESS			2.3 STREET AL		1	,	
CITY-ST-ZIP		□ BELETE	2.4 CITY-ST-ZIP		ZIP	Change Addition	
TITLE NAME		L DELETE	3.2 NA			L Change L Addition	
STREET ADDRESS			3.3 STREET ADDRE		ADDRESS		
ŀ							
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE			Change Addition	
NAME		precis	4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	DELETE 5.1 TIT			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP	-		5.4 C	TY-ST	ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 N/	ME			
STREET ADDRESS	A Maria Cara		6.3 \$1	REET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		-ZIP		
dd throught	of the second se	1. t etc	ha avani	-4:	stated in south	ion 110 07/2\/i\ Elorida Statutas further certify that the information	

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 an attachment with an address.

7/17/98

253-2010