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

PROFIT							
CORPORATION							
ANNUAL REPORT							
1999							



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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r. Corporatio						
Semble	R CENTERS, INC.			The second secon		
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}						
Principal Plac	ce of Business	Mailing Address		n lånet merman tildt koren tildta meret nelt debet ment mint mint mint menet illet menet illet		
5858 CENTRAL AVENUE		5858 CENTRAL AVENUE				
ST. PETERSBU		ST. PETERSBURG FL 33707				
				DO NOT WRITE IN THIS SPACE		
ļ				3. Date Incorporated or Qualified		
<u> </u>		C		05/22/1992		
	Place of Business	2a. Mailing Address		4, FET Namber Applied For		
21		26		59-3127287 Not Applicable		
Suite, Apt	#, etc	Suite, Apt #, etc		5. Certificate of Status Desired . \$8.75 Additional Fee Required		
22		[27]				
City & Stal	te	City & State		6. Election Campaign Financing \$5.00 May Be		
Zip	Country	28 Zip	Country	Trust Fund Contribution: Added to Fees		
24	Гі	h i	1	8. This corporation owes the current year Intangible Personal Property Tax [Yes No		
24	25 9. Name and Address of Current	[29]	, o i	10. Name and Address of New Registered Agent		
<u> </u>	B. Hattle and Address of Culter	r registered Agent	81 Name	IU. Hame and Address of New Kegistered Agent		
SHE	R, CRAIG H.					
ſ	S CENTRAL AVENUE		82 Street Addi	ress (P.O. Box Number is Not Acceptable)		
	PETERSBURG FL 33707		83	· · · · · · · · · · · · · · · · · · ·		
			03			
			84 City	 85 Zip Code		
				FL		
11. Pursuant	to the provisions of Sections 607,0502 registered agent, or both, in the State of	2 and 607.1508, Florida Statutes of Florida, Such change was aut	 the above named corp horized by the corolorate 	poration submits this statement for the purpose of changing its registered on's board of directors. Thereby accept the appointment as registered		
© egent.la	im familiar with, and accept the obligat	ions of, Section 607.0505, Florid	la Statutes.	on a feet of the control of the cont		
SIGNATURE						
	Signature, typed or printed name of register of a gen-		sgistead Agertsejat o nejere 1∎			
12.	OFFICERS AN	and the second s	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	[] DECETE	1171'(F	[Change [Addition		
NAME	SEMBLER, MELVIN F.		1.2 NAMS			
STREET ADDRESS			13 \$1REFT ADORESS	7000000000071		
CITY-ST-ZIP	ST. PETERSBURG FL	± .	14 O(1) - \$1 - ZV			
TITLE	DSV	[DELETE	2 (7)((+	7000028588971 -04/30/99041435-09533355 ****158.75 ****158.75		
NAME	SEMBLER, BRENT W.		22 NAME	本本本本100。(0 本本本本100。(0)		
STREET ADDRESS	5858 CENTRAL AVENUE		2 1 STREET ADORESS			
CITY-ST-ZIP	ST. PETERSBURG FL		2.4 CiTY+S1-7#*			
TITLE	DVTS	[] DEFE LE	3111146	[Change { JAddition		
NAME	SEMBLER, GREGORY S.		3.2 NAMF			
STREET ADDRESS	5858 CENTRAL AVENUE		3.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL		34 Cdy-51-70			
TITLE	DP	[] DELETE	4 1 TITLE	[] Change [] [I Addition [
NAME	SHER, CRAIG H.		4 2 NAME			
STREET ADDRESS	5858 CENTRAL AVENUE		43 STREET ALLOWENS			
CITY-\$T-ZIP	ST. PETERSBURG FL		4.4 City - S7 - ZiP	1		
TITLE	D	[DELETE	51 THE	[Change [Addition		

City-St-Zie

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 87(3/0). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual ry port is true and accurate and that my signature shall have the same legal effect as if made under onth, that I am an officer or director of the corporation of the receiver or this tee empowered to execute this reject as required by Chapter 607. Florida Statutes, and that my name appears in Block 13 if changed, or pin an attachmissing in an address, with all other like empowered.

SIGNATURE: \

STREET ADDRESS

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS

SHEEHAN, DENNIS M. 5858 CENTRAL AVENUE

ST. PETERSBURG FL

NATURE AND TYPEGOR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

[] DELETE

4-19-99

777-384-6000