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

CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # V54359

(7)

AC&R TRAINING INSTITUTE, INCORPORATED

Principal Place of Business										
6937 41ST TERRACE NORTH ST. PETERSBURG FL 33709										

Mailing Address

6937 41ST TERRACE NORTH ST. PETERSBURG FL 33709

FILED Jan 22 1998 8:00am Secretary of State



									DO NOT WRITE IN THIS SPACE						
									3. Date I	ncorporated	or Qualified				
									07/3	1/1992					
	Place of Busines	2a. Mailing Address						4. FEI N	ımber				Applied For		
21		26						<u>59</u>	3133628			1	Vot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						E Cortifi	cate of Statu:	Dooired	101	\$8.75	Additional		
22		27						3. Cerun	sale or statu:	s Desiled		Fee f	Required		
City & Stat	e	City & State						6. Election	n Campaign	Financing		\$5.00	O May Be		
23	28								Trust F	Fund Contrib	ution			to Fees	
Zıp		Country	y Zip Country							orporation ov	ves or has pa	aid the curr	ent year la	ntangible	
24	25	29	30					Personal Property Tax due June 30. Yes No							
	g. Name an	d Address of Current	Register	ed Agent				1	o. Name	and Addres	s of New Re	gistered A	gent		
KILLINGER, LADONNA 81 Name													-		
6937 41ST TERRACE NORTH							82 Street Address (P.O. Box Number is Not Acceptable)								
ST	. PETERSBUR	G FL 33709				32	Sheer	Addless	(F.O. DO)	CHamberis	NOT ACCEPTAL	Jie)			
				83										<u> </u>	
						<u> </u>									
						84	City					FI	85 Zip	Code	
11. Pursuant	to the provision:	s of Sections 607.0502	and 607.	1508. Florida Stati	utes, the	ahov	e-nameo	corporat	ion subm	its this staten	nent for the r	virocea of	changing	ite registered	
Unice of I	edizieten adeut	, or both, in the State t	or morroa.	Such change was	autnor:	ים ea	v tne cor	poration's	board o	directors.	nereby accep	ot the appo	intment a	s registered	
	m tamilar with,	and accept the obliga	ions of, Se	ection 607.0505, F	-iorida S	atute	S.								
SIGNATURE	Signature, typed or n	rinted name of registered agen	nad title if an	policeble (NC	VIE Begiete	red Ace	ant eignetur	e required wh	na relactotia	-)		DATE			
12.	, , , , , , , , , , , , , , , , , , ,	OFFICERS AND			1:		ork organization	e required wit		ONS/CHANG	ES TO OFFIC		DIRECTO	DS IN 12	
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indicated	on this annual re	ormation supplied with sport or supplemental	annual rep	oort is true and ac	curate a	kempi nd tha	iion state at my sig	nature sh	ion 119.0 all have t	/(ತ)(ಃ), Florid he same lega	a Statutes. [] al effect as if	rurther certi made unde	ry that the er oath: th	at 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 attachment with an address.

SIGNATURE:

1-11-99