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PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 16 1998 8:00am Secretary of State

Principal Piace 815 SUPERIO SUITE 1625 CLEVELAND (US	R AVENUE	Mailing Address DEGRAND * JOSEPH DEGR 815 SUPERIOR A CLEVELAND OH 4	VE., SUITE 1625	DO NOT WRIT	TE IN THIS S	9 1311 9 13)1 2 11	11
2. Principal Pi	lace of Business	2a. Mailing Addres	SS .	07/31/1992 4. FEI Number		TA	pplied For
]		26		65-0349044			ot Applicable
Suite, Apt.	₩, etc.	Suite, Apt. #, e	itc.	5. Certificate of Status Desired	X		Additional
City & State	9	City & State		C Stantian Comparing Financian			equired
		28		Election Campaign Financing Trust Fund Contribution			May Be to Fees
Ζφ	Country	Zip	Country	8. This corporation owes or has	paid the curr		
L	25	29	30	Personal Property Tax due Jur	ne 30. 🛚 🗶	Yes [□ No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	Registered A	gent	
	GEL, JAMES D ESQ.		81 Name				
	36 TAMIAMI TRAIL N., #B		82 Street A	ddress (P.O. Box Number is Not Accept	able)		
NA	PLES FL 34103		83				
			[]				
			84 City		FL	85 Zip	Code
		02 and 607.1508. Ftorida	Statutes, the above-named o	corporation submits this statement for the	ourpose of	changing I	ts registered
SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the ciblig		Statutes, the above-named of ewas authorized by the corpo 505, Florida Statutes. [NOTE Registered Agent signature in	corporation submits this statement for the oration's board of directors. I hereby acc aquired when reinstaling)	purpose of ept the appo	changing I intment as	ts registered registered
IGNATURE	Signature Typed or printed name of registered fig	and and the diappleable	(NOTE: Registered Agent signature re		DATE ICERS AND	DIRECTO	RS IN 12
SIGNATURE .	Signature Typed or profed name of registered by OFFICERS AN	yout and this it applicable	INOTE Registered Agent signature re 13. TE 1.1 TITLE	equired when reinstating)	DATE ICERS AND		RS IN 12
SIGNATURE 12. 1ILE IAME	Signature bysed or profed name of regidered na OFFICERS AN OCURTIS, JOYCE M	AND DIRECTORS DELE	INOTE Registered Agent signature re 13. TE 1.1 TITLE 1.2 NAME	equired when reinstating)	DATE ICERS AND	DIRECTO	RS IN 12
SIGNATURE 12. 17LE IAME TREET ADDRESS	Signature byted or profed name of regularized and OFFICERS AN OCURTIS, JOYCE M 3300 GULF SHORE BLVD N	AND DIRECTORS DELE	INCITE Registered Agent signature to 13. TE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	equired when reinstating)	DATE ICERS AND	DIRECTO	RS IN 12
2. ITLE IAME TREET ADDRESS	Signature byted or profed name of regularized and OFFICERS AN OCURTIS, JOYCE M 3300 GULF SHORE BLVD N NAPLES FL 34102	AND DIRECTORS DELE	INCITE Registered Agent signature to 13. TE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	equired when reinstating)	DATE FICERS AND	DIRECTO	RS IN 12
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2. ITLE IMME ITREET ADORESS ITY-ST-ZIP ITLE AAME	Signature byted or profed name of regularized and OFFICERS AN OCURTIS, JOYCE M 3300 GULF SHORE BLVD N NAPLES FL 34102	Red ned the d'applemble ND DIRE CTORS DELE	13. 13. 13. 14.	equired when reinstating)	DATE FICERS AND	DIRECTOF	RS IN 12
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