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

PROFIT CORPORATION ANNUAL REPORT 1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

1. Corporation	AN SPHERE, INC.	3 (3)		E PARAK SIKOND ONIN BONIN BIAN BANKA IN	
Principal Plans	of Business	Mailing Address		<u>-</u>	// 8/3// 8/8/1 6/6// 8/8// 8/8// 8/8// 8/8//
Principal Place of Business 185 RITA BOULEVARD MELBOURNE BEACH FL WELBOURNE FL 32336 US MAITING Address POST OFFICE BOX 3603 MELBOURNE FL 32336 US				DO NOT WRITE 3. Date Incorporated or Qualified	IN THIS SPACE
				08/27/1992	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3143379	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27				5. Continuate of States Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5,00 May Be
23		28 Counts		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pair	
24	9. Name and Address of Currer	29	30	Personal Property Tax due June 10. Name and Address of New Reg	
LD.		in regional region	81 Name	IO, Hallo and Addison of Hon Hos	, store of rigoria
Krasny, gary mitchell 185 rita blyd.					
	ELBOURNE BEACH FL 32951		82 Street Addr	ess (P.O. Box Number is Not Acceptable	e)
1716	EDOCHNE DENOTITE GEOST		83		
			-		
			84 City		FL 85 Zip Code
	o the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, F	ites, the above-named corp authorized by the corporat lorida Statutes.	oration submits this statement for the pulion's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NO	TE Registered Agent's gesture requir	ed when reinstaling)	DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	Krasny, gary mitchell		1.2 NAME		
STREET ADDRESS	185 RITA BLVD.		1.3 STREET ADDRESS		
CITY-\$T-ZIP	MELBOURNE BEACH FL		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME	•	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	2. 4 CITY - ST - ZIP		Character Leading
TITLE		☐ htrtit	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3 4. CITY - ST - ZIP 4 1 TITLE		Change Addition
NAME		time	4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		-
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby c	ertify that the Information supplied w	ith this filing does not qualify t	for the exemption stated in:	Section 119.07(3)(i), Florida Statutes. I fu	urther 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 attachment with an address. 407

FILED

Jan 28 1998 8:00am

Secretary of State