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

PROFIT CORPORATION ANNUAL REPORT



FILED

May 07 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P19699

(8)

1. Corporatio		GEMENT CORP	PORATION	. ,						
Principal Plac	e of Busines:	s	Mailing Addre	ss			() OB () OB () O	IND OLD UND STORE BUILDING	BINEL DIDIL HOOL	
711 HIGH ST C/O BETTY (DES MOINES	Creighton. I		C/O BETTY (711 HIGH STREET C/O BETTY CREIGHTON, LAW DEPT. DES MOINES IA 50392-0000			DO NOT WRITE IN THIS SPACE			
US		~	US				3. Date Incorporated or Qualified 06/17/1988]		
2. Principal P	lace of Busin	nėss	2a. Mailing Ad	dress			4. FEI Number		Applied For	
H			26				42-0948302		Not Applicable	
Suite, Apt.	#. etc.		}- ı ' '	Suito, Apt. #, etc.			5. Certificate of Status Desired	1 1 4	5 Additional Regulred	
22 City & Stat	e		City & Stat	City & State			6. Election Campaign Financing			
23			t i	28			Trust Fund Contribution	, , , , , , , , , , , , , , , , , , ,		
Zip	Zip Cos		7 _(F)			,	8. This corporation owes or has p			
24			29	30			Personal Property Tax due June 30. 🔼 Yes 🗌 No			
			rrent Registered Agen	τ	81	Name	10. Name and Address of New F	legistered Agent		
		TION SYSTEM								
1200 S . Pine Island Road Plantation FL 33324				82 Street		Street Ad	ddress (P.O. Box Number is Not Accepta	able)		
1 6	MILLION	1 E 000E4			83	-				
					84	City		85 Z	ip Code	
						1		FL [·	
agent. I a SIGNATURE	m f a miliar wi	th, and accept the ob-	aligations of, Section 60)7.05 05 , F	lorida Statule:	3.	orporation submits this statement for the pration's board of directors. I hereby acc project when reinstalling) ADDITIONS/CHANGES TO OFF	DATE		
TITLE	P	CALLET AND A		DE LET E	1,1 TITLE		ADDITIONS/CHANGES TO OFF	Chang		
NAME	JONES,	S.L.	_		1.2 NAME					
STREET ADDRESS		H STREET			1,3 STREET	ADORESS	·			
CITY-ST-ZIP	DES MC	ANES IA	«••••		1.4 C(TY - 9	51 - ZIP				
TITLE	VS	ANI 181	LJ	DELETE	2.1 TITLE	1		L. Chang	ge L Addition	
NAME STOCKE ADDRESS	HOFFM/	an, J.N. H STREET			2.2 NAME 2.3 STREET	*DDD0000				
STREET ADDRESS CITY-ST-ZIP	DES MO				2 4 CITY - 3					
TITLE	T			DELETE				Chang	ge Addition	
NAME		T, CRAIG T			3 2 NAME					
STREET ADDRESS		H STREET			3.3 STREET	ADDRESS				
CITY-ST-ZIP	DES MO	DINES IA	-	DELETE	3.4. CITY - 1	ST-ZIP			A James	
TITLE	PADNEC	Y L. DELETE BARNES, CRAIG R		4.1 TITLE 4.2 NAME			L Chang	ge L. Addition		
NAME STREET ADDRESS	SAA LIINII ATOPET					ADDRESS				
CITY-ST-ZIP		DES MOINES IA		4.4 CITY - S						
TITLE	V	DELETE		5.1 TITLE			Chang	ge Addition		
NAME		ROVE, D A			52 NAME	İ				
STREET ADDRESS		H STREET			5.3 STREET	ADDRESS				
CITY-ST-ZIP	DES MO	VINES IA	· · · · · · · · · · · · · · · · ·	(VI) EXC	5.4 CITY - S	T-ZIP		——————————————————————————————————————	A database	
TITLE	D	DAVID J.	Ц	DELETE	6.1 TITLE			☐ Chang	ge Addition	
NAME STREET ADDRESS		H STREET			6.2 NAME 6.3 STREET	ADDRESS				
STREET ADDRESS	DES MO				6.3 S(REE)	ADDRESS				

14. 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 supplier ental 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.