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PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000076807 (1)

SGS DEVELOPMENT, INC.

FILED Apr 13 1998 8:00am Secretary of State

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Principal Place of E	Business	Mailing Address			, realisable of this realit said balti date d	*** ***** ***** ***	10, 001). 120, 120.
1088 OLD COVENTRY COURT OVIEDO FL 32765 1088 OLD COVENTRY COURT OVIEDO FL 32765							
			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified		
-					09/04/1997		
2. Principal Place of	of Business	2a. Mailing Addres	S		4. FEI Number		Applied For
1		26			59-3472037		Not Applicab
Suite, Apt. #, etc	C.	Suite, Apt. #, et	tc.		5. Certificate of Status Desired	 -	75 Additional e Required
City & State		City & State			6. Election Campaign Financing	\$5	.00 May Be
3		28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution	Ad	ded to Fees
Zip	Country	Zιρ	Coi	untry	8. This corporation owes or has paid th		
4	[25]	29	30	,	Personal Property Tax due June 30.	☐ Yes	⊠ No
	Name and Address of Curr	ent Registered Agent		1	10. Name and Address of New Registe	ered Agent	
	AS, GREGORY S			81 Name			
1088 O	LD COVENTRY COURT			B2 Street A	Address (P.O. Box Number is Not Acceptable)		
OVIEDO) FL 32765				indicate (i.e. zak italiaa ita ita ita ita ita ita ita ita ita		
				83			
				84 City		1221	
				84 City		FL 85	Zip Code
SIGNATURE Signate	ure, typed or printed narrow of registered a	agent and little if applicable	(NOTE: Registers	ed Agent signature			
12.	OFFICERS A				required when reinstating) Dr	ATE	
TITLE		ND DIRECTORS	13.		required when reinstating) D/ ADDITIONS/CHANGES TO OFFICERS		TORS IN 12
NAME		ND DIRECTORS	13.				
			13.	ITLE IAME	ADDITIONS/CHANGES TO OFFICERS P/D A.B. DOUGLAS	AND DIREC	
STREET ADDRESS			13. TE 1.1 TO 1.2 N	ITLE IAME	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	
			13. TE 1.1 Ti 1.2 N 1.3 S	ITLE NAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS P/D A.B. Douglas 3462 OLD NASSAUVELLE RO	AND DIREC	
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6.4 CITY-ST-ZIP
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 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.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

SIGNATURE: And Duty GREG S. DOUGLAS - TREASURER a/a/a (402) 366-2890

DELETE

DELETE

CH2E034 (10/97)

Change

Change

Addition

Addition