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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **F65668**

Country

9. Name and Address of Current Registered Agent

. Corporation Name

22

23

24

Zip

City & State

RICH, A. WAYNE 912 N HIGHLAND AVE ORLANDO FL 32803

VICTORIA EQUITIES, INC.

Principal Place of Business
912 N HIGHLAND AVE./ 32803
912 N HIGHLAND AVE./ 32803
913 N HIGHLAND AVE./ 32803
914 N HIGHLAND AVE./ 32803
915 N HIGHLAND AVE./ 32803
915 N HIGHLAND AVE./ 32803
916 N HIGHLAND AVE./ 32803
917 N HIGHLAND AVE./ 32803
918 N HIGHLAND AVE./ 32803
919 N HIGHLAND AVE./ 32803
919 N HIGHLAND AVE./ 32803
910 N HIGHLAND AVE./ 32803
910 N HIGHLAND AVE./ 32803
910 N HIGHLAND AVE./ 32803
911 N HIGHLAND AVE./ 32803
912 N HIGHLAND AVE./ 32803
913 N HIGHLAND AVE./ 32803
914 N HIGHLAND AVE./ 32803
915 N HIGHLAND AVE./ 32803
915 N HIGHLAND AVE./ 32803
916 N HIGHLAND AVE./ 32803
917 N HIGHLAND AVE./ 32803
918 N HIGHLAND AVE./ 32803
919 N HIGHLAND AVE./ 32803
919 N HIGHLAND AVE./ 32803
910 N HIGHLAND AVE./ 3

27

28

29

Zip

City & State

FILED Feb 01, 1999 8:00am Secretary of State

02-01-1999 90022 017 \*\*\*150.00



E./ 32803									
			DO NOT WRITE IN THIS SPACE						
			3. Date Incorporated or Qualifed						
			02/03/1982						
			4. FEI Number				Applied For		
			59-2159823				Not Applicable		
<b>:</b> .			5. Certifcate of Sta	atus Desired		<b>\$8.75</b> Additional Fee Required			
,			6. Election Campa Trust Fund Con	-		<b>\$5.00</b> May Be Added to Fees			
Country 30			This corporation owes the current year In Personal Property Tax.			Intangible	□No		
	10. Name and Address of New Registered Agent								
	81	Name					•		
	82	Street Add	street Address (P.O. Box Number is Not Acceptable)						
	83		<u></u>		* F :		1 - 1 - 1 - 1 - 1 - 1 - 1		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

City

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	. (NOTE:	Registered Agent signature require	d when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	RS IN 12
ULTE.	DP	□ DELETE	1.1 TITLE	1	☐ Change	Additio
AME	RICH, A WAYNE		1.2 NAME	·		
TREET ADDRESS	912 N´HIGHLAND AVE		1.3 STREET ADDRESS			
ITY-ST-ZIP	ORLANDO, FL 00000		1.4 CITY-ST-ZIP		•	
ITLE		☐ DELETE	2.1 TITLE		☐ Change	☐ Additio
IAME			2.2 NAME			
TREET ADDRESS	•		2.3 STREET ADDRESS			
OTY-ST-ZIP			2. 4 CITY-ST-ZIP			
MLE	Salar Sa	☐ DELETE	3.1 TITLE	^	Change	Additio
AME	Marine Color		3.2 NAME			
TREET ADORESS	ing Arting Conference of the C		3.3 STREET ADDRESS		i 19. – El Billight, Meryen	441 25514 1141
ITY-ST-ZIP			3.4. CITY-ST-ZIP			
TLE		☐ DELETE	4.1 TITLE	· # 1 35.	Change	: 🔲 Additio
IAME	6 <b></b>	•	4. 2 NAME			
TREET ADDRESS		:	4.3 STREET ADDRESS			
TY-ST-ZIP	***		4.4 CITY-ST-ZIP	•	•	
TLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Additio
AME:			5.2 NAME	4.7		
TREET ADDRESS	.i.		5.3 STREET ADDRESS			
ITY-ST-ZIP	Sp. 4		5.4 CITY-ST-ZIP	•		
TLE		DELETE	6.1 TITLE		Change	Additio
IAME			6.2 NAME			
TREET ADDRESS	The Book of the Contraction of t	•	6.3 STREET ADDRESS		*	
YEAR SID			64 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, with all other like empowered.

**SIGNATURE** 

MANUATURE RACUASION AGENT AGENT OF THE OF TH

1/15/99

407-649-4355 Daytime Phone # 06/11) +0037