

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

FILED

**May 13 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



**FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # P95000074090

1. Corporation Name

NEEDER & NEEDER, INC.

Principal Place of Business Mailing Address
**3886 CALIBRE BEND LANE #809
WINTER PARK, FL 32792**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 503 FITZWILLIAM WAY		26 503 FITZWILLIAM WAY		65-0612306		<input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23 ORLANDO FL.		28 ORLANDO FL.		29 32828		30 USA	
Zip		Country		Zip		Country	
24 32828		25		29 32828		30 USA	

9. Name and Address of Current Registered Agent

**FERNANDEZ, EDUARDO
501 BRICKELL KEY DRIVE
SUITE 400
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name	RUBEN D. TORO
82 Street Address (P.O. Box Number is Not Acceptable)	7345 SAND LAKE RD. STE. 202
83	
84 City	ORLANDO FL
85 Zip Code	32819

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.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

[Handwritten Signature]

04-27-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE MINAS, LUIZ	1.2 NAME	DE MINAS, LUIZ
STREET ADDRESS	3886 CALIBRE BEND LANE, #809	1.3 STREET ADDRESS	503 FITZWILLIAM WAY
CITY-ST-ZIP	WINTER PARK, FL 32792	1.4 CITY-ST-ZIP	ORLANDO FL. 32828
TITLE	DS <input type="checkbox"/> DELETE	2.1 TITLE	DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STOLET, NORMA S	2.2 NAME	STOLET, NORMA S.
STREET ADDRESS	3886 CALIBRE BEND LANE, #809	2.3 STREET ADDRESS	503 FITZWILLIAM WAY
CITY-ST-ZIP	WINTER PARK, FL 32972	2.4 CITY-ST-ZIP	ORLANDO FL. 32828
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	700002525097 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	-05/15/98--01031--036
STREET ADDRESS		6.3 STREET ADDRESS	***150.00
CITY-ST-ZIP		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)(l), 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.

[Handwritten Signature]

04-27-98 (1107) 207-8180

CR2E034 (1/097)