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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(1)

DOCUMENT # S81730 BROAD AND CASSEL, P.A.

FEED

98 APR 29 PM 2: 13

SECTION OF STATE
TALLARASSEE, FLORIDA



	-					
Principal Place of Business Mailing Address					a constain ens respectant hanna beint mant didit	DIAKE BIRUK DIDIK ALAKE BIBIT 1881
#1100 #1100		390 NORTH ORANGE A' #1100 ORLANDO FL 32801			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
					09/20/1991	
2. Principal Place of Business 2a. Mailing Address					4, FEI Number	Applied For
21		26			59-3389763	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
27     27						Fee Required
23 28					Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Countr	v	This corporation owes or has paid the	Added to Fees
24	25	29	30	•	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cui	rent Registered Agent			10. Name and Address of New Registe	red Agent
B&C CORPORATE SERVICES OF CENTRAL FL INC			81	Name		
	NORTH ORANGE AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
	TE 1100					
ORL	ANDO FL 32801		83	<b>'</b>		
1			84	City		85 Zip Code
11 Pursuant	to the provisions of Sections 637.	0502 and 607 1508. Florida Statu	ites the abov	o named cor	poration submits this statement for the purpo	FL 00 24p code
office or	egistered agent, or both, in the St	poration's board of directors. I hereby accept the	appointment as registered			
	ne lamiliar with and acceptine of	, aucus tua noupec, lo anoungiis	ionda Statute	95.		
SIGNATURE	Signature, typed or printed name of registers	agent and lete if applicable (NC	TI. Registered Ag	ent signature requ	used when reinstating) DA	16.
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	DP	DELFTE	1.1 TITLE			☐ Change ☐ Addition
NAME	BISHOP, KEN C		1.2 NAME		40000251 -05/06/98-	29749
STREET ADDRESS	300 N. ORANGE AVE., SUI	TE 110	1.3 STREE	1 ADDRESS	-05/06/98-	01036013
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-	ST-ZIP	****150.0	
TITLE	AS DUGGELL KILL D	☐ DELETE	2.1 TITLE			Change Addition
NAME OTDGET ADDRESS	RUSSELL, KIM R. 390 N. ORANGE AVE., SUT	1E 1100	2.2 NAME			
STREET ADDRESS	ORLANDO FL	IC 1100		T ADDRESS		
CITY-ST-ZIP TITLE	ONDANOO FL	DELETE	2.4 CITY- 3.1 TITLE	S1-ZIP		Change Addition
NAME			3.2 NAME			E change E Madition
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			3 4. CITY-			
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME		A	
STREET ADDRESS			4.3 STREE	1 ADDRESS	<b>4</b> 4	)
CITY-ST-ZIP			4.4 CITY -	ST-ZIP		
TITLE		☐ DELETE	5.1 TiTL€		41 29	☐ Change ☐ Addition
NAME			5.2 NAME		40 1	
STREET ADDRESS			5.3 STREE	T ADDRESS	′. ( • <b>°</b>	
CITY-ST-ZIP		Dougas	5.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		ı	☐ Change ☐ Addition
NAME PERCET ADDRESS			6.2 NAME			
STREET ADDRESS			4	ADDRESS		
CITY-ST-ZIP			64 COY-3	KI-MP I		

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 adoptal 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 record or business in Block 12 or Block 13 if changed, or on an attachment with an address.