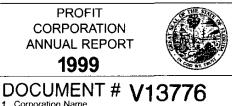
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jun 17, 1999 8:00 am Secretary of State

06-17-1999 90005 035 ***550.00

CHAIG J.	KUSUTA & ASSUCIATI	ES, INC.								
		- · · · -			-					41: 11: 11: 11: 11: 11:
Principal Place	e of Business	Mailing Address					I INDII ALIBAT KAND SIISI IDDII		ENCO MINIC NO	Bfi Blitin atati 1881
515 VIRGINIA A	VENUE	515 VIRGINIA AVENUE								
WINTER PARK		WINTER PARK FL 32789	WINTER PARK FL 32789							
U\$ U\$							DO NOT WRITE IN THIS SPACE			
						3	 Date Incorporated or Qualife 02/12/1992 	1		
2. Principal P	ace of Business	2a, Mailing Address				4	I. FEI Number		\Box	Applied For
21		26				59-3119143		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional			5 Additional	
22					٦	. Certificate of Status Desired		Fee	Required	
City & State		City & State			6	. Election Campaign Financing	, \Box	\$5.0	00 мау Ве	
23		28			<u> </u>	Trust Fund Contribution		Adds	ed to Fees	
Zip	Country	Zip	r1	untry		8	 This corporation owes the cu 	rrent year Int		E-#
24	25	29	30				Personal Property Tax.	B	Yes	No No
	9. Name and Address of Cu	rrent Registered Agent		81	Nama	10). Name and Address of New	Registered	Agent	
KUS	UTA, CRAIG J.			61	Name					
	LIONHEART RD.		8			Address (ss (P.O. Box Number is Not Acceptable)			
	ER-PARK-FL-32792			63						
***	LITT AIRCI E OZI SE			03					•	
				84	City			FL	85 Z	ip Code
11 Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida Sta	tutes, the a	above	e-named i	corporatio	on submits this statement for th	e purpose of	changing	its registered
office or re	egistered agent, or both, in the S	tate of Florida. Such change was bligations of, Section 607.0505, I	s authorize	d by	the corpo	ration's t	poard of directors. I hereby acc	apt the appoi	ntment as	s registered
e agent. Fai	m tamiliar with, and accept the of	oligations or, Section 607.0505, i	-IUTIGA SIA	iules.	•					
SIGNATURE	Signature, typed or printed name of registere	d agent and title if applicable. (NO	TE: Registere	d Agen	t signature re	quired when	reinstating)	DATE		
12.		S AND DIRECTORS	13.				ADDITIONS/CHANGES TO C	FFICERS AN	ID DIREC	TORS IN 12
TITLE	Р	☐ DELETE 111		TITLE		P			XXI Chan	ge Addition
NAME	KOSUTA, CRAIG J	1.2		1.2 NAME KO		Kosu	TA CRAIG J.	بسر د		
STREET ADDRESS	2772 LIONHART RD		138		13 STREET ADDRESS 515		SUTA CRAIG J. 5 VIRGINIA AVENVE			
CITY-ST-ZIP			14 CITY-ST-ZIP W1		WIN	TER PARK, FL	<u> 32 7</u>	<u> ອງ</u>		
TITLE				2.1 TITLE					Chan	ge 🗌 Addition
NAME			2.2 N		2.2 NAME					
STREET ADDRESS			2.3 STF		ADDRESS					
CITY-ST-ZIP		2.4			2. 4 CITY-ST-ZIP					
TITLE		☐ DELETE	☐ DELETE 311		31 TITLE				Chang	ge Addition
NAME			32 N	AME						
STREET ADDRESS			3.3 5	STREET	ADDRESS					
CITY-ST-ZIP" -			3.4:	CITY-S	T-ZIP .					
TITLE		☐ DELETE	4.1 7	4.1 TITLE					Chan	ige
NAME			4.2	NAME						
STREET ADDRESS			4.3 5	STREET	ADDRESS					
CITY-ST-ZIP			4.4 (4.4 CITY-ST-ZIP						
TITLE		☐ DELETE	5.1 TITLE						Chan	ge
NAME				5.2 NAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				CITY-S1	T-ZIP					
TITLE		☐ DELETE		TILE					Chan	ge
NAME				IAME						
STREET ADDRESS					[ADDRESS]					
CITY-ST-ZIP			6.4 (CITY-SI	T-ZIP					

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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

907-6 47- 7558