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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # V35663

(6)

O'ROURKE BROS.INC.OF ORLANDO

FILED Feb 05 1997 8:00am Secretary of State



Principal Place	Place of Business Mailing Address				- E LEBRA DITUDED ATUDE DELING DELATO DE	
3763 MERCY ST ORLANDO FL 3 US		3763 MERCY STAR COURT ORLANDO FL 32808-4654 US				
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3. Date Incorporated or Qualified 05/13/1992	3a. Date of Last Report 02/07/1996
2. Principal Place of Business 10 STREET 26 1205 4 10 /			D AV	NUE	4. FEI Number	Applied For Not Applicable
21 476 Suite, Apt	7 - 77107 7	Suite, Apt. #, etc.	7/10	nac	36-3818172	60.75
22					5. Certificate of Status Desired	Fee Required
City & State 23 OR L	State City & State NE, III				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3 2 8	Country 11 25 OR ANGE	29 61265 3	o Reck	Islam	B. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
O'ROURKE, JOE 81 Name						
3763 MERCY STARY CRT				Street Addre	ss (P.O. Box Number is Not Acceptab	e) .
SUITE 100						
ORL	ANDO FL 32808		83			
			84	City		FL 85 Zip Code
office or n agent. Fai SIGNATURE	to the provisions of Sections 607,0502 egistered agent, or both, in the State o m familiar with, and accept the obligat	f Florida. Such change was au ons of, Section 607.0505, Flori	ithorized b ida Statute	y the corporation	on's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
12.				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE			1.1 TITLE			Change Addition
NAME	•		1.2 NAME			
STREET ADDRESS	1205 4TH AVE. 1.33		1.3 STREE	T ADDRESS	•	
CITY-ST-ZIP	TVI VETTE IN			ST-ZIP		
TITLE	01		2.1 TITLE			Change Addition
NAME STREET ADDRESS	Oncolut, see		2 2 NAME	T ADDRESS		
CITY - ST - ZIP			2.3 STREE			
TITLE			31 TITLE	0: 411	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME		32.0				
STREET ADDRESS	333		3 3 STREE	T ADDRESS		
CHTY - ST - ZIP		····	34, D(TY-	ST-ZIP		
TITLE	DELETE. 4.1 TI		4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS	1			T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY- 5.1 TITLE	ST-ZIP	 	Change Addition
NARRE			5.1 TITLE			Control Control

CITY - ST - ZIP 6.4 CITY-ST-ZIP 14. I do 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 B

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS

CITY - ST- ZIP

TITLE

NAME STREET ADDRESS

DELETE

Change

Addition