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

OCUMENT#

1. Corporation Name 1. Corpor									
	•					I IBBNI BUJAN BUJA HIKA UJAN LAGI I	HATA BARAK BABAK B	IAN PIAN AN	M
Principal Place of Business Mailing Address									ON ARBIT LEAK
2555 N. COURTENAY PARKWAY 2555 N. COURTENAY PA									
SUITE 33 SUITE 33									
MERRITT ISLAND FL 32953 MERRITT ISLAND FL 329						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address						09/16/1992 4, FEI Number		Ar	optied For
21		26	26			59-3142140		<u> </u>	ot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional	
22		27				5. Certificate of Status Desired		Fee Re	equired
City & Stat	e	⊢ '	City & State			6. Election Campaign Financing	-		May Be
Zip	Country		Zip Country			Trust Fund Contribution Added to Fees			
24	F-1 F-1		30	_		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	g. Name and Address of Curr					10. Name and Address of New R			
KF	EVIN C SCHLEITH			81	Name				
	5 E CRISAFULLI RD			82	Street Add	ress (P.O. Box Number is Not Accepta	hle)		
MERRITT ISLAND FL 32953					0000000				
				83	• • • • • • • • • • • • • • • • • • • •				
				84	City		FL	85 Zip (Code
11, Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Flo	rida Statutes, the	above	e-named cor	poration submits this statement for the		hanging it	s registered
agent. I a	registered agent, or both, in the Sia im familiar with, and accept the obl	ligations of, Section 60	i7.0505, Florida S	Statutes	r the corpora S.	poration submits this statement for the tion's board of directors. I hereby acception	pi ine appoi	nonent as	registered
SIGNATURE	<u> </u>	== ==							
12.	Signature, typed or pentrid name of registered. OF LICEURS A	agent and title if applicable AND DIRECTORS		tered Age	nt signature requ	red when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CEDS AND C	SECTOR	OS IN 12
TITLE	PSD			.1 TITLE		ADDITIONS/CHANGES TO OFF		Change	Addition
NAME KEVIN SCHLEITH				1.2 NAME				- 0	
STREET ADDRESS 2555 N. COURTENAY PKWY. #33			1	1.3 STREET ADDRESS					
CITY-ST-ZIP	MERRITT ISLAND FL			4 CITY-S	- 1				
TITLE				1 TITLE			L	Change	Addition
NAME			2	2.2 NAME					
STREET ADDRESS			2	3 STREET	ADDRESS				
CJTY-ST-ZIP				4 CITY - S	ST - ZIP		·		
TITLE		L		1 TITLE			L] Change	Addition
NAME				2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE				4. CITY-S	51 - ZIP			Change	Addition
NAME				2 NAME	-		_		
STREET ADORESS					ADDRESS				
CITY-ST-ZIP				4 CITY-S					f
TITLE				1 TATLE				Change	Addition
NAME .			5	2 NAME	1				\
STREET ADDRESS			5.	3 STREET	ADDRESS				ĺ
CITY-ST-ZIP			. 5.	4 CITY-S	T-ZIP				
TITLE			DELETE 6.	1 TITLE				Change	Addition
NAME	li .		6.	2 NAME	1				į
STREET ADDRESS									
			6	3 STREET	ADDRESS				

indicated on this annual report or supplied with this timing does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the informatic 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 or the attachment with an address.

FILED

Mar 24 1998 8:00am

Secretary of State