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

DOCUMENT # P96000088172 (7)

MARSHA CHESKO, INC.

Principal Place of Business

Mailing Address

FILED Jan 22 1998 8:00am Secretary of State



11724 FAUBISHER COURT ORLANDO FL 32837			11724 FRUBISHER COURT ORLANDO FL 32837											
								DO NOT WRITE IN THIS SPACE						
								3	 Date Incorporate 10/25/1996 					
2. Principal Place of Business				2a. Mailing Address				4	, FEI Number			A	optied For	
21				26				1	59-340650	00		N	ot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.								\$8.75	Additional	
22								•	, Certificate of Sta	ins Desilen		Fee R	equired	
City & State				City & State				6	. Election Campai	gn Financing		\$5.00	May Be	
23			28	<u> </u>					Trust Fund Cont	ribution			to Fees	
Zip	Zip Country			Zip Coun				8. This corporation owes or has paid the current year			rent year In	tangible		
24 25			29	30					Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent							
MARSHA A CHESKO							81 Name							
11724 FRUBISHER COURT				į			82 Street Address (P.O. Box Number is Not Acceptable)							
ORLANDO FL 32837												_		
						83								
						84	City					85 Zip	Code	
						07	City				FL	, 65 Zip	Code	
11. Pursuant	to the provisions of \$	Sections 607.0502 a	nd 60	07.1508, Florida Sta tut ia. Such change was i	es, the a	ρονε	e-named	corporation	on submits this sta	tement for the	purpose of	changing i	ts registered	
office or ri	egistered agent, or t m familiar with, and a	ooth, in the State of accept the obligatio	Florid ins of,	a. Such change was a . Section 607.0505, Fk	authorize orida Sta	a by tutes	the corp	rporation's	board of directors	. I nereby acce	ept the app	ointment as	registered	
SIGNATURE														
SIGNATURE	Signature, typed or printed	name of registered agent a	nd litle i	f applicable (NO	E Registere	d Age	ni signature	e required whe	n reinstating)		DATE			
12.	OFFICERS AND DIRECTORS					13.			ADDITIONS/CHAI	NGES TO OFFI	ICERS AND	DIRECTO	RS IN 12	
TITLE	PSTD			DELETE	1.1 T	ITLE						☐ Change	Addition	
NAME	CHESKO, MAF				1.2 N	AME							Ī	
STREET ADDRESS	11724 FRUBIS	HER COURT			1.3 S	TREET	ADDRESS	ľ						
CITY-ST-ZIP	orlando fl	32837			1.4 0	ITY-S	1 - ZIP							
TITLE				DELET e	2.1 J	TLE						☐ Change	☐ Addition	
NAME					2.2 N	AME								
STREET ADDRESS					2.3 S	TREET	address							
CITY-ST-ZIP					2.4(HTY-S	I - 21P			,			1	
TITLE				☐ DELETÉ	3.1 T	TLE						Change	Addition	
NAME					3.2 N	AME	i	ì					ľ	
STREET ADORESS					3.3 S	TREET	ADDRESS							
CITY-ST-ZIP					3 4. (OTY-S	T- ZIP							
TITLE				☐ DELETE	4.1 1			1				Change	Addition	
NAME					4.2	IAME								
STREET ADDRESS					4.3 S	TREET	ADDRESS	1					1	
CITY-ST-ZIP					4.4 C	ITY-S	T-ZIP							
TITLE	*			DELETE	5.1 T							Change	Addition	
NAME					5.2 N									
STREET ADDRESS							address (1						
CITY-ST-ZIP						ITY-SI]	
TITLE				DELETE	6.1 To		4"	 				Change	Addition	
NAME					6.2 N									
STREET ADDRESS							ADORESS						Ī	
CITY-ST-ZIP						ince i . ITY - \$1								
VIII-31-EIF					0.4 6	111.9	- 216	1						

14. Thereby 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.

41298