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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 334380

(4)

|   | ITONE OF FLORIDA INC                            | 9 (4)  |  |                                 |                             |  |                 |                             |                                     |
|---|---|--|--|---------------------------------|-----------------------------|--|-----------------|-----------------------------|-------------------------------------|
| Principal Place of Business Mailing Address |   |  |  |                                 |                             |  |                 |                             |                                     |
| 3025 E SOUT<br>ORLANDO FL                   |   | 3025 E SOUTH ST<br>ORLANDO FL 32803-6460     |  |                                 |                             |  |                 |                             |                                     |
|   |   |  |  |                                 |                             | <ol> <li>Date Incorporated or Qualified<br/>08/28/1968</li> </ol>  | 1               | ite of Last R<br>01/1996    | leport                              |
| 2. Principal<br>21                          | Plane of Business                               | 2a. Mailing Address<br>26                    |  |                                 | 4. FEt Number<br>59-1143047 |  |                 | oplied For<br>ot Applicable |                                     |
| Suite, Ap<br><b>22</b> ]                    |   | Suite, Apt. #, etc.                          |  |                                 |                             | 5- Certificate of Status Desired   |                 |                             | Additional<br>equired               |
| City & Sta<br>23                            |   | City & State                                 | · <b></b>                                    |                                 |                             | Election Campaign Financing     Trust Fund Contribution  |                 | \$5.00<br>Added             | May Be<br>to Fees                   |
| 7φ<br><b>24</b>                             | Country   25   9. Name and Address of Curre     | Zip<br>[29]                                  | 29 30  |                                 |                             | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No  10. Name and Address of New Registered Agent |                 |                             |                                     |
|   |   |  | utes, the ab<br>s authorized<br>forida Statu |                                 |                             | poration submits this statement for the pation's board of directors. I hereby accept   |                 |                             | Code<br>ts registered<br>registered |
| 12.   | Signation by experience translations of FREPS A | genta at the Papple able (NO<br>NO DIRECTORS | OTE Registered                               | Age                             | ent signature requ          | ired when reinstating) ADDITIONS/CHANGES TO OFFIC  | DATE<br>ERS AND | DIRECTOR                    | IS IN 12                            |
| TIFLE                                       | CD  | DELFTE                                       |  | 1.1 TOLE                        |                             |  |                 | Change                      | Addition                            |
| NAME  | GIANNONE, ARTHUR A                              |  | 1.2 NA                                       | 1.2 NAME                        |                             |  |                 |                             |                                     |
| STREET AFORESS                              | •   | 1.3 5  |  | REET                            | ADDRESS                     |  |                 |                             |                                     |
| CHIYET ZW                                   | ORLANDO, FL 00000                               |  | 1.4 CIT                                      |                                 | T-ZIP                       |  |                 |                             |                                     |
| TITLE                                       | PDS   | [_] DELETE                                   |  | 2.1 TITLE                       |                             |  |                 | Change                      | Addition                            |
| NAME<br>Object a Association                | GIANNONE, ROBERT  3025 E SOUTH ST               |  |  | 2 2 NAME                        |                             |  |                 |                             |                                     |
| STREET ADORESS<br>CITY: ST-200              | ORLANDO, FL 00000                               |  |  | 2 3 STREET AL<br>2 4 CITY - ST- |                             |  |                 |                             |                                     |
| THE   | V   | ☐ DELE1E                                     | 3 1 TIT                                      |                                 | 01-14P                      |  | ; • f           | Change                      | Addition                            |
| NAME  | DENNIS, KENNETH T.                              |  | 3 2 NA                                       | ME                              |                             |  |                 |                             |                                     |
| STREET ADDRESS                              |   |  | 3381   | REET                            | ADDRESS                     |  |                 |                             |                                     |
| CITY 51-74                                  | ORLANDO FL                                      |  | 3.4. CI                                      | ] Y - S                         | ST - 71P                    |  |                 |                             |                                     |

14. I do hereby certify that the information supplied with this filting 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 suppliered at 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 direction of the polyporation of the reference trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and research is Research 12 of Block Folk or participations with an address.

4.1 TITLE

4.2 NAME 4.3 STHEET ADDRESS

5.1 TITLE

5 2 NAME

61 TITLE

62 NAME

4.4 CITY - ST - ZIP

5.3 \$TREET ADDRESS

6.3 STREET ADDRESS

ROBERT GIANNONE, PRESIDENT

5 4 City - ST - ZIP

SIGNATURE:

THE

NAME

THE

NAMi

T-HE NAME

SIRE-1 ADDRESS OFY ST ZE

SPREEL ASSORTED

STREET ADORESS

CHY SEZ

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

03/20/97

407-898-3333

Change

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Addition

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**FILED** 

Mar 25 1997 8:00am

Secretary of State