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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

"是我,我们就是我们的一个,我们就是我们的一个,我们,我们就是我们的,我们就是我们的一个,我们就是我们的一个,我们就是我们的一个,我们们的一个,我们们们们们们们的一个,我们们们们们们们们们们们们们们们



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 597594

(1)

FILED									
Apr 23 1998 8:00am									
Secretary of State									

CH CD

	KISSIMI	MEE ENTERPRISES, INC.				]				
Pri	ncipal Plac	e of Business	Mailing Address				LBOL OLIAN (DIR) DIR) BYRY DI	(		
2535 N.O.B.T. 200 S ORANGE AVE										
KISSIMMEE FL 34744 2300										
			ORLANDO FL 32801-3432				DO NOT WRITE IN THIS SPACE			
1			U\$			3. Date Incorporated	t or Qualitied		İ	
Ļ	Oringinal P	Place of Business 2s. Mailing Address				12/15/1978 4. FEI Number				
21	rnicipair	—-¬ ~ ~						<del></del>	plied For	
1211	Suite, Apt.	26   Suite, Apt. #, etc.				59-1867711	<del></del>	\$8.75	t Applicable	
22	COMO, Apr.	27				<ol><li>Certificate of State</li></ol>	us Desired 🔲	Fee Re		
1	City & State					6. Election Campaig	n Financing	\$5.00	·	
23	Ť	28				Trust Fund Contril		Added 1		
	Zip	Country	Zip	Countr	у	8. This corporation of	wes or has paid the			
24		25		30	_	Personal Property	Tax due June 30.	Yes [	] No	
		9. Name and Address of Curr	ent Registered Agent			10. Name and Addre	es of New Registere	d Agent		
		C <b>CO</b>		81	Name					
	200 S ORANGE AVE				Street	Address (P.O. Box Number is Not Acceptable)				
	230	0		83		·			,	
	ORL	ORLANDO FL 32801			]					
١.				84	City			. 85 Zip (	Code	
							F	L		
4	office or r agent. I a SNATURE	to the provisions of Sections 607.0 egistered agent, or both, in the Stam familiar with, and accept the obling forms of printed none of registered.				poration's board of directors.	I hereby accept the a		registered	
12.		OFFICERS AND DIRECTORS 13					GES TO OFFICERS A	ND DIRECTOR	S IN 12	
TITL	E	PTD	☐ DFLETE	1.1 TITLE				Change	Addition	
) NAM	AE .	RUSSELL, JOHN H.		1.2 NAME						
STR	EET ADDRESS			1.3 STREE	T ADDRESS					
CIT	r-ST-ZIP	ORLANDO FL		1,4 CITY-	ST-ZIP					
TITL	E	<b>∀</b> .	DELETE	2.1 TITLE		Executive Vice	President	Change	Addition 1	
NAX	AE	RUSSELL, JOHN B.		2.2 NAME						
STR	REET ADDRESS 2276 CHEROKEE DRIVE			2 3 STREFT ADDRESS						
cm	/-ST-ZIP			2. 4 CITY-	ST-ZIP		············			
TITL	E	8	DELETE	3.1 TITLE		Secretary		7 Change	Addition	
NAV	#E	NEFF, TERRY A.		3.2 NAME		Debbe R. Chalif	oux			
STR	EET ADDRESS	939 JASMINE ST		3.3 STREE	1 ADDRESS	2535 N. O.B.T.				
	(-ST-ZIP			3.4. CITY-	S1 - ZIP	Kissimmee, FL	34744			
TITL	1	1		4.1 TITLE	:	}		Change	Addition	
NAM				4. 2 NAME						
STR	EET ADDRESS			4.3 STREE	t address					
_	-ST-ZIP			4.4 CITY -	ST-ZIP				T Core	
TITL	ì			5.1 TITLE		}		Change	Addition	
NAA				5.2 NAME						
ľ	EET ADDRESS				T ADDRESS	1				
	-ST-ZIP		DELETE	54 CITY	S1-ZIP	<del></del>		Change	Addition	
TITL			ן הנונונ. ריין הנונונ	6.1 TITLE	I			☐ Change	- AUUIIIUII	
NAA				6.2 NAME						
STREET ADDRESS					1 ADDRESS					
r cm	-ST-ZIP			6.4 CITY-	51-ZIP	1				

14. 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 3) address.