FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:/

DOCUN 1. Corporation ELVIS		34 (7)								
Principal Place of Business Mailing Address 5120 CURRY FORD RD ORLANDO FL 32812 ORLANDO FL 32812										
						3. Date Incorporated or Qualified 12/03/1979	3a. Date o	of Last Re 5/22/19		
2. Principal Plac	ce of Business	2a. Mailing Address	Mailing Address			4. FEI Number			Applied For	\exists
21 Suite, Apt. #	. etc.	Suite. Apt. #, etc.	Suite, Apt. #, etc.			59-1953148			Not Applicable Additional	<u> </u>
22		27				5. Certificate of Status Desired			Required	
City & State		City & State	n			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Z _I p	Country 25	Ζιρ 29	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No				
	9. Name and Address of Currer		1901			10. Name and Address of New R		genl		\exists
				B1 Nam	0					
	, John P. Urry Ford Road			82 Stree	et Addres	dress (P.O. Box Number is Not Acceptable)				
	DO FL 32812			B3						\dashv
				B4 City	-			85 Zıç	p Code	
11 Pursuant to	the provisions of Sections 607 0500	and 607 1508 Florida Statute	e the abo	hernen-av	corporati	on submits this statement for the purp	FL ocea of chan	olog de r	enistered offic	
or registere	d agent, or both, in the State of Flori	da. Such change was authorize	d by the	corporation	's board	of directors. I hereby accept the appo	pose of chan pintment as re	agistered	agent. I am	
SIGNATURE _	Char Punn	in JOHA	0 1	PUR	AT S	• •	4-24-	-96		
12.	grature, typed or printed name of registered agent OFFICERS AN	D DIRECTORS	13.	Agent agnatu	e required w	hen reinstating) ADDITIONS/CHANGES TO OFFI	4)RS IN 12	CROE034 (19/05)
TITLE	P	☐ DELETE	1. 1 T	1. 1 THILE				Change	Addition	15
NAME	WESEP, CARL VAN 3242 PAISLEY CIRCLE		1.2 N							5
STREFT ADDRESS CITY-S1-ZIP	ORLANDO FL			FREET ADDRES ITY-ST-ZIP	S					2
TITLE		☐ DELETE					Chançe	Addition		
NAME			2.2 N	AME					_	
STREET ADDRESS			2 3 5	FREET ADDRES	s					
CHY-ST-ZIP			240			······································				_
TITLE		☐ DELETE	☐ DELETE 3.1			☐ Chan		Chançe	☐ Addition	
NAME CERCLE ADGRESS			32 N		٠					
STREET ADDRESS CITY-ST-ZIP			4	TREET ADORES TY-ST-ZIP	13					
TI!LE			4. 1 T					Change	Addition	-
NAME			4.2 N	AME						
STREET ADDRESS			4.3 \$1	reet addres	s					
CITY-ST-ZIP			4.4 Ct	1Y-ST-21P						
TITLE	DELE		5. 1 TITLE					Change	☐ Addition	
NAME			5.2 N/							
STHEET ADDRESS				REET ADDRES	S					
CITY+S1+ZIP TITLE			5.4 Ci	TY-ST-ZiP	-	l Ch		Change	[] Addition	\dashv
NAME			6.2 N					OHENGE		
STREET ADDRESS				ireet addres	s					
CITY-ST-ZIP				TY-ST-ZIP						
14. I do hereby certify that to oath; that I	the information indicated on this anni	ual report or supplemental annu oration or the receiver or trustee	shed and lal report i empowe	does not o	accurate	the exemption stated in Section 119.0 and that my signature shall have the eport as required by Chapter 607, Fic	same legal el	flect as if	made under	

CAPL F. UN Weses 4-24-96 407-275-7100
Determine OFFICER OF DIRECTOR
Designing OFFICER OF DIRECTOR