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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 27 1998 8:00am Secretary of State

AND PARK AVE APARK AVE APA	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees repl year Intangible Yes No
US	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees repl year Intangible Yes No
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2109880 Suite, Apt. #, etc. 5 Suite, Apt. #, etc. 5. Certificate of Status Desired 59-2109880 Suite, Apt. #, etc. 5. Certificate of Status Desired 5. Certificate of Status Desired Agent 5. This corporation was paid the cur Personal Property 1ax due June 30. 5. Certificate of Status Desired Agent Status 5. Status Address of New Registered Agent 5. Certificate of Status Desired Agent Address of New Registered Agent 5. Certificate of Status Desired Agent Address (P.O. Box Number is Not Acceptable) 6. Certificate of Status Desired Agent Address (P.O. Box Number is Not Acceptable) 6. Certificate of Status Desired Agent Address (P.O. Box Number is Not Acceptable) 6. Certificate of Status Desired Agent Address (P.O. Box Number is Not Acceptable) 6. Certificate of Status Desired Agent Address (P.O. Box Number is Not Acceptable) 6. Certificate of Status Desired Agent Address (P.O. Box Number is Not Acceptable) 6. Certificate of Status Desired Agent Address of New Registered Agent 6. Certificate of Status Desired Agent Address of New Registered Agent	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees repl year Intangible Yes No
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Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip Country Zip Country Zip Country Zip Country Zip Signature to the provisions of Sections 607 0502 and Cor, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the apparagn and address of control to the provisions of Sections 607 0502 and Cor, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the apparagn 1 am farmitian with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the apparagn 1 am farmitian with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the apparagn 1 am farmitian with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of the apparagn 1 am farmitian with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of the apparagn 1 and farmitian with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of the apparagn 1 and farmitian with, and accept the obligations of Section 607 0505, Florida Statutes, the	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees repl year Intangible Yes No
Suite, Apt. #, etc. 20	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees repl year Intangible Yes \[\] No
City & State Ci	\$5.00 May Be Added to Fees rept year Intangible Yes No
City & State City & State Country 28	\$5.00 May Be Added to Fees rept year Intangible Yes No
28 Trust Fund Contribution	Added to Fees rept year Intangible Yes No
210 22 29 30 30 Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent GREEN, ADLAI S 3147 TALA LOOP LONGWOOD FL 32779 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the previsions of Sections 607 05:02 and 607 15:08. Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appropriate pagent 1 am familiar with, mad accept the obligations of Section 607 05:05, Florida Statutes. SIGNATURE SIGNAT	
GREEN, ADLAI S 3147 TALA LOOP LONGWOOD FL 32779 11. Pursuant to the provisions of Sections 607 05:02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of agent 1 am familiar with, and accept the obligations of Section 607 05:05, Florida Statutes, the above-named corporation submits this statement for the purpose of agent 1 am familiar with, and accept the obligations of Section 607 05:05, Florida Statutes SIGNATURE Signature, typed or prefed name of registered agent and this diagraph and this diagraph and this diagraph and the purpose of th	Agent
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LONGWOOD FL 32779 83 84 City FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agont, or both, in the State of Florida Such change was sutherized by the corporation's board of directors. I hereby accept the appearance of registered agont 1 am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE SIGN	
### City ####################################	
### Pursuant to the provisions of Sections 607-0502 and 607-1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered again, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the apparent with, and accept the obligations of Section 607-0505, Florida Statutes ### Signature bysed or period make of registered again this distribution of the Policy of the Corporation's board of directors. I hereby accept the apparent with and such change was authorized by the corporation's board of directors. I hereby accept the apparent with and social statutes #### Signature bysed or period make of registered again and this distribution of the Policy of the Corporation's board of directors. I hereby accept the apparent of the purpose of the purp	
TITLE PD CITICE SEC DELETE 1.3 SIREET ADDRESS 1.4 CITY-ST-ZIP LONGWOOD FL DELETE 3.1 SIREET ADDRESS CITY-ST-ZIP LONGWOOD FL DELETE 3.1 SIREET ADDRESS CITY-ST-ZIP LONGWOOD FL DELETE 3.2 NAME STREET ADDRESS CITY-ST-ZIP LONGWOOD FL DELETE 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL DELETE 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL DELETE 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP LONGWOOD FL 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	_
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NAME GREEN, ADLAIS 3147 TALA LOOP CITY-ST-ZIP TITLE NAME GREEN CAROLYN 3147 TALA LOOP LONGWOOD FL TITLE NAME GREEN CAROLYN 3147 TALA LOOP CITY-ST-ZIP LONGWOOD FL DELETE 2 1 TITLE 2 2 NAME 2 NAME 2 STREET ADDRESS CITY-ST-ZIP DELETE 3 1 TITLE 3 1 TITLE 3 2 NAME 3 2 NAME 3 2 NAME 3 3 STREET ADDRESS CITY-ST-ZIP 3 3 STREET ADDRESS CITY-ST-ZIP 3 4 CITY-ST-ZIP 3 4 CITY-ST-ZIP 3 4 CITY-ST-ZIP 3 4 CITY-ST-ZIP	
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CITY-ST-ZIP	
DELETE	
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STREET ADDRESS 5.4 CITY-ST-ZIP	Change Addition
TITLE DELETE 61 TITLE	∟ Change 1 Addition
NAME 62 NAME	Change Addition
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP 64 CITY-ST-ZIP	

In Section 119 07(3)(i), Florida Statutes. I further certify that the informatical report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address

Aduri S. Green