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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1 <b>998</b>		Y. /	Secretary of State DIVISION OF CORPORATIONS			Secretary of State			
, ·	MENT #	803369 URANCE CORF	<b>\</b> - <b>/</b>			-	( INDION INIII ANIAN ENIAN ENIA DEIN DEIN INI	(B)(	(B\$1 B1841 1881	
Principal Plac	e of Business		Mailing Address					INDER OF ORDER OF ORDER OF	I DET BUDIU HADI	
6630 W BROAD ST			6630 W BROAD ST							
P.O. BOX 27567 RICHMOND VA 23230			P.O. BOX 27567 RICHMOND VA 23230				DO NOT WRITE IN	THIS SPACE		
I THE MOTE	IN GMESO		DIOTIMOND IN ESERO				3. Date Incorporated or Qualified			
							08/03/1928			
	Place of Business		2a. Mailing Address				4. FEI Number	1	Applied For	
Suite, Apt. #, etc.			26				54-0278740		Not Applicable	
Suite, Apt.	π, <b>ਚ</b> ια. ੁ	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Regulred		
City & Stat	te	City & State				6. Election Campaign Financing		<del></del>		
23		28				Trust Fund Contribution		O May Be d to Fees		
Zip	C	ountry	Zip	Count	iry		8. This corporation owes or has paid			
24	25		29	30			Personal Property Tax due June 30		□ No	
Name and Address of Current Registered Agent							10. Name and Address of New Regis	stered Agent		
		COMMISSIONER		"	31	Name				
STATE OF FLORIDA					32	Street Addr	ress (P.O. Box Number is Not Acceptable)	)		
CAPITOL BLDG. TALLAHASSEE FL 32301					33					
IALLANASSEE FL 32301					_  _					
•				8	14	City		FL 85 Zip	Code	
11. Pursuant	to the provisions of	Sections 607.0502	and 607 1508, Florida State	utes, the abo	ve-	named corp	poration submits this statement for the purp		its registered	
office or r agent. I a	registered agent, or Im familiar with, and	both, in the State of Laccept the obligation	' Florida. Such chan <b>ge wa</b> s ons of, Section 607.05 <b>0</b> 5, F	authorized Torida Statut	by t les.	the corporat	poration submits this statement for the purp tion's board of directors. I hereby accept t	he appointment a	s registered	
SIGNATURE							•			
	Signature, typed or printe	d name of registered agent a			Agent	signature requir	····	DATE	50.04.45	
12.	Vs	OFFICERS AND I	DELETE	13.		T	ADDITIONS/CHANGES TO OFFICER	Change	Addition	
NAME	JORDAN, RU	SSELL W. III	_ otten	1.2 NAM				C Outside		
STREET ADDRESS	6630 W. BRO			1.3 STRE		DDRESS				
CITY-ST-ZIP	RICHMOND, 1			1.4 CHY		ł				
TITLE	CD		DELETE	2.1 TITLE				Change	Addition	
NAME	FOSTER, CH/			2.2 NAM	Ē					
STREET ADDRESS	6630 W BRO			2 3 STRE	ET A	DDRESS				
CITY-\$T-ZIP	RICHMOND, 1	/A 00000		2.4 CITY		- 2IP				
TITLE	VTD		L] DELETE	3.1 TITLE				☐ Change	☐ Addition	
NAME	EVANS, G. W			3.2 NAM						
STREET ADDRESS	6630 W BRO			3.3 STRE		í				
CITY-ST-ZIP TITLE	PD PD	<u>^</u>	☐ DELETE	3.4. CITY 4.1 TITLE		- ŽIP		Change	Addition	
NAME	ALPERT, JAN	ET A	L] better	4.7 III.				L Criange	E Addition	
STREET ADDRESS	6630 W BRO	- •		4.3 STRE		ODRESS				
CITY-ST-ZIP	RICHMOND V			4.4 CITY		1				
TITLE	VD		DELETE	5.1 TITLE				Change	Addition	
NAME	ASTHEIMER,	KENNETH		5.2 NAMI	E	1		-	ļ	
STREET ADDRESS	6630 W BRO	ad st		5.3 STRE	ET A	DDRESS				
CITY-ST-ZIP	RICHMOND, \	/A 00000		5.4 CITY	- S1-	ŻIP				
TITLE			DELETE	6.1 TITLE	: -			Change	Addition	
NAME				6.2 NAMI	E	ĺ				
STREET ADDRESS				6.3 STRE	ET AL	DDRESS				

111Y-ST-ZIP

14. I hereby 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.

**FILED** 

Feb 06 1998 8:00am