co	PROFIT PROFIT DRPORATION JUAL REPORT 1998	SU BA	LORIDA DEP/ Sandra Secret	IS \$550.00 ARTMENT OF STATE B. Mortham ary of State CORPORATIONS	Feb 09 1 Secreta		
	JMENT # F151 Ion Name IN HOLDINGS (ORLANDO		(7)				
•	ace of Business DATH EOLA DRIVE FL 32801		Address NORTH EOLA O FL 32801	DRIVE	DO NOT WRI	TE IN THIS SPACE	
					3. Date Incorporated or Qualified 01/15/1981	1	
2. Principal	Place of Business	2a. Mailir 26	ng Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number 59-2055930		Applied For Not Applicab
Suite, Ap	1. #, eic .	Suite,	Apt. #, etc.		5. Certificate of Status Desired		5 Additional
2 City & Ste	ate	27 City 8	State		6. Election Campaign Financing	Fee	Bequired
3 Zip	Country	28 Zip		Country	Trust Fund Contribution	Add	ed to Fees
4	25	29		30	 This corporation owes or has Personal Property Tax due Jun 	ne 30. 🗌 Yes	No
	9. Name and Address of Cu	urrent Registered	Agent	81 Name	10. Name and Address of New F	Registered Agent	
	ohnson, loran a. 15 North Eola Drive				ddress (P.O. Box Number is Not Accept	able)	
	RLANDO FL 32801					able)	
				83			
				[]			
11. Pursuan	it to the provisions of Sections 607	.0502 and 607.150	8, Florida Stalu	84 City	orporation submits this statement for the	FL ``	'ip Code g its registere
11. Pursuan office or agent. I SIGNATURE	am familiar with, and accept the o	obligations of, Section	on 607.0505, F	ites, the above-named c authorized by the corpo	orporation submits this statement for the ration's board of directors. I hereby acc	FL ``	
agent. I SIGNATURE 12,	am familiar with, and accept the o Signalure, typod or printed rame of registerie OFFICERS	obligations of, Section	on 607.0505, F	Ites, the above-named c authorized by the corpo- lorida Statutes 11. Registeres Agent signature re 13.		FL purpose of changin ept the appointment DATE ICERS AND DIRECT	g its registered as registered
agent. I SIGNATURE	am familiar with, and accopt the c Standure, typed or printed name of registers OFFICERS PDT BARKIN, ALLAN 173 GLENGARRY AVE	obligations of, Section	on 607.0505, F	ites, the above-named c authorized by the corpo lorida Statutes	equired when reinstating)	PL purpose of changin ept the appointment	g its registered as registered ORS IN 12
agent. I SIGNATURE 12. TITLE NAME	am familiar with, and accopt the c Signature, typed or printed rame of registerin OFFICERS PDT BARKIN, ALLAN	obligations of, Section	on 607.0505, F	Ites, the above-named c authorized by the corpo- lorida Statutes 11. Registereb Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP	equired when reinslating) ADDITIONS/CHANGES TO OFF	FL purpose of changin ept the appointment DATE ICERS AND DIRECT	g its registered as registered ORS IN 12 ge Addition
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