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PROFIT CORPORATION ANNUAL REPORT

1999°



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F70210 1. Corporation Name

UPSALA FLORIDA CORPORATION INC.

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Principal Place of Business Mailing Address						-	8) 48) 4 (8)	H1861 B1011 G1814 B	ishti diam iani
9217 HIDDEN BAY LANE 9217 HIDDEN BAY LANE									
ORLANDO FL 32819-4859 ORLANDO FL 32819-4859						DO NOT WRI	TE IN THE	e enace	
US . US						3. Date Incorporated or Qualifed	TE IN THE	SOPACE	
						03/09/1982			,
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap.	plied For
21	lade of Business	26				59-2203551			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					N/	\$8.75	Additional
22		27				5. Certifcate of Status Desired		Fee Re	quired
City & Stat	e	City & State				6. Election Campaign Financing	r v	\$5.00	
23		28				Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the curr	ent year Ir		
24	25	11	30			Personal Property Tax.	3	Yes	□No
	9. Name and Address of Current	Registered Agent		81	Mana	10. Name and Address of New I	Registered	Agent	
NAD	D, JOHN SCOTT			' '	Name				
	7 HIDDEN BAY LANE	1		82	Street Addre	ss (P.O. Box Number is Not Accepta	able)		
	ANDO FL 32819			83					6. 17.
01,2	74150 12 02010			"			194	国籍"注	
				84	City	,	FI	85 Zip (Code
								_	
11 Durguant	to the provisions of Sections 607 0502	and 607 1508. Florida Statute	s the al	hove-r	named corno	ration submits this statement for the	purpose c	f changing its	registered
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was au	ithorized	i by the	named corporation	ration submits this statement for the o's board of directors. I hereby acce	purpose c	of changing its pintment as re	registered gistered
office or r	egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florida. Such change was au ions of, Section 607.0505, Flori	ithorized ida Statu	iby the	e corporation	n's board of directors. I hereby acce	purpose o of the appo	f changing its pintment as re	registered gistered
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SIGNATURE 12.	egistered agent, or both, in the State or m familiar with, and accept the obligation of the signature, typed or printed name of registered agent OFFICERS AND PSD	of Florida. Such change was autions of, Section 607.0505, Flori and title if applicable. (NOTE:	Registered 13.	Agentsi	e corporation	is board of directors. I hereby acce	purpose of the appo	ND DIRECTO	RS IN 12
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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, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90026 020 ***163.75