FILED

Feb 26, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1.	OCUN Corporation PAGE TIM		002274									
P	rincipal Place	of Business	Mailing Address									
MAIN AT WATER ST MAIN AT WATER ST											•	
	DUDERSPORT	PA 16915	COUDERSPORT PA 1691	5				DO NOT W	RITE IN THIS	SDACE		
US	3		US							SFACE		
		_						3. Date Incorporated or Qualif 05/09/1995	ea 			
2. Principal Place of Business			2a. Mailing Address	2a. Mailing Address				4. FEI Number			Applied For	
21			26					25-1755672			Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	ı 🗆	•	Additional Required		
22			27									
	City & State	/ & State City & State						6. Election Campaign Financia	ng 🖂	7	0 May Be	
23	_	28				Trust Fund Contribution				Added to Fees		
	Zip					Country 8. This corporation owes the current				_		
24)	25 29 30				Personal Property Tax.				Yes	□No	
		9. Name and Address of Current	Registered Agent					10. Name and Address of Ne	w Registered	Agent _		
	T. (F.)	PREMIUSE HALL CORROBATION	CVCTEM INC		81	Nam	e				. 1	
THE PRENTICE-HALL CORPORATION SYSTEM, INC.					82	Stree	et Addres	Address (P.O. Box Number is Not Acceptable)				
110 NORTH MAGNOLIA ST.									<u> </u>			
\	TALL	AHASSEE FL 32301			83						ţ	
					84	0.5				85 Zi	p Code	
						City			FL	. 65 -	1	
	office or re agent. I ar	o the provisions of Sections 607.0502 gistered agent, or both, in the State on Infamiliar with, and accept the obligat	of Florida. Such change was ions of, Section 607.0505, F	lorida	Statutes	tne co	rporation	is board of directors. Thereby ac	the purpose of cept the appoi	changing ntment as	its registered registered	
L		Signature, typed or printed name of registered agent		IIE: Reg	13.	it signatu	re required	when reinstating) ADDITIONS/CHANGES TO		ID DIREC	TORS IN 12	
<u> </u>	2 .	OFFICERS AN	D DIRECTORS DELETE	_	1.1 TITLE			ADDITIONO/OFFICEO TO	0, 1	Chang		
1	TLE	RIGAS, JOHN J	0 0222.12	•						_	_	
		MAIN AT WATER ST			1.2 NAME		_					
STREET ADDRESS					1.3 STREET		25					
		COUDERSPORT PA 16915			14 CITY-S	T-ZIP	-			Chang	je 🗆 Addition	
Ţ	TLE	DV	☐ DELETE		2.1 TITLE						lo	
N	AME	RIGAS, MICHAEL			2.2 NAME		ı					
s	TREET ADDRESS	MAIN AT WATER ST			2.3 STREE	ADDRE	SS					
С	TY-ST-ZIP	COUDERSPORT PA 16915	□ DELETE	_	2 4 CITY-5	ST-ZIP		•	-		e Addition	
	TLE	DTV			3.1 TITLE					Chang	le 🗆 Yadanon i	
N	AME	RIGAS, TIMOTHY		3		3.2 NAME						
s	TREET ADDRESS	MAIN AT WATER ST			3,3 STREET ADDRESS		SS					
c	ITY-ST-ZIP	COUDERSPORT PA 16915			3.4. CITY-ST-ZIP		1					
T	TLE	DV	☐ DELETE		4.1 TITLE					Chang	je 🗌 Addition	
N	AME	· · · · · · · · · · · · · · · · · · ·		4. 2 NAME		1						
s	TREET ADDRESS	MAIN AT WATER ST			4.3 STREE	TADDRE	ss					
C	ITY-ST-ZIP	COUDERSPORT PA 16915			4 4 CITY-S	T-ZIP						
-	TLE	504		E 5.1 TITLE					Chang	ge		
l N	AME .	∈ MILLIARD, DANIEL R		5.2 NAME								
1	TREET ADDRESS	MAIN AT WATER ST			5.3 STREE	T ADDRE	ss					
1	ITY-ST-ZIP	COUDERSPORT PA 16915			5.4 CITY-S	T-ZIP						
\vdash	ITLE	VAS	☐ DELETE		6.1 TITLE		\top		-	Chang	je 🔲 Addition	
1	AME	FISHER, RANDALL D			6.2 NAME							
1	TREET ADDRESS	MAIN AT WATER ST			6.3 STREE	T ADDRE	SS					

COUDERSPORT PA 16915 CITY-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 receive for 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 chapted, or on an attack the true and address. With all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

Randall D. Fisher

1/5/99

(814) 274-9830