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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

11 00.00.00.	MENT # F9603 'S ENVIRONMENTAL EQU	` '					
Principal Plac	ce of Business	Mailing Address		· · · · · · · · · · · · · · · · · · ·		YIDAH OLOH OLUHU O	/(0 /4 100 1
735 COMMERCE CIRCLE		735 COMMERCE CIRCLE					
LONGWOOD FL 82750		LONGWOOD FL 32750		DO NOT WRITE IN THIS S	DACE		
US		US			3. Date Incorporated or Qualified	-AGE	
					08/19/1982		
2. Principal P	Place of Business	2e. Mailing Address	·		4. FEI Number	Appl	lied For
21	26				59-2209848	Not A	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Add	
City & State		City & State	City & State			Fee Requ	
23		<u>├</u> 1 '	28		6. Election Campaign Financing Trust Fund Contribution	м. 00.22 Added to I	
Zip	Country	7ip	Country		8. This corporation owes or has paid the curre		
24	25	29	30		_ _ · · · · · · · · · · · · - · · · · · ·	Yes 🔲 I	_
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registered A	gent	
ALLEN, RONALD P. 2104 VENETIAN WAY			81	Name			
			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
WI	NTER PARK FL 32789		83				
			84	City	FL	85 Zip Co	ide
11. Pursuant office or r agent. I a	to the provisions of Sections 607. registered agent, or both, in the Si im tamiliar with, and accept the of	0502 and 607.1508, Florida Statu ale of Horida. Such change was oligations of, Section 607.0505, Fl	tes, the above authorized by orida Statutes	e-named co the corpor s.	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appo	changing its reintment as rei	registered igistered
SIGNATURE							
12.	Signature typed or printed name of impolered	Lagent and title if hijt-licable. (NO: AND DIRECTORS	IE Registered Age	nt signature rec	ured when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS	IN 40
TITLE	PD	DELETE	1.1 TITLE			Change	Addition
NAME	ALLEN, RONALD P.		1.2 NAME 1.3 STREET ADDRESS		·		
STREET ADDRESS	2104 VENETIAN WAY						
CITY+ST-ZIP	WINTER PARK FL		1.4 CITY - ST - ZIP				
TITLE	8	L] DELETE	2.1 TITLE	- 1	l	Change [Addition
NAME	KELLY, GAIL L 2904 BACKIEL DR		2.2 NAME		32440 County Road 437		
STREET ADDRESS	ORLANDO FL		2.3 STREET		Sorrento, FL 32776		
CITY-ST-ZIP TITLE	DELETE		2. 4 DITY - 5 3.1 TITLE	SI - ZIP	·	Change	☐ Addition
NAME			3 2 NAME	1	•		
STREET ADDRESS			33 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		DELETE	41 TITLE			Change [Addition
NAME			4. 2 NAME	[
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP	DELETE		4.4 CITY- ST-ZIP			Chapes	Addition
TITLE NAME	L., DECEIE		5.1 TITLE		,	Change [Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 C(1Y - S)				
TITLE			6.1 TITLE			Change [Addition
NAME			6.2 NAME				
STREET ADDRESS	ess		6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				
14. I hereby of indicated officer or in Block 12 (certify that the information supplied on this annual report or suppleme director of the corporation or the r or Block 13 if changed, out on the	d with this filing does not qualify fental annual report is true and accepter or mister efficience to placement with an address.	or the exempt curate and that execute this r	tion stated i at my signa report as re	in Section 119.07(3)(i), Florida Statutes. I further cert ture shall have the same legal effect as if made undi- quired by Chapter 607, Florida Statutes; and that my	ify that the inf er oath; that I y name apper	formation l am an ars in

Ronald P. Allen

4/23/98

407-834-3239

FILED

May 12 1998 8:00am

Secretary of State