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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

LUCKY "T" INCORPORATED

Mailing Address

FILED May 08 1998 8:00am Secretary of State



% JAMES T F 49 NORTH DO ORLANDO FL	DLLINS AVENUE	% JAMES T HALL 43 NORTH DOLLINS AVENI ORLANDO FL 32805	UE	DO NOT WRITE IN THIS 3. Date incorporated or Qualified	S SPACE
				11/05/1982	Į.
2. Principal P	ace of Business	2a. Mailing Address	A 01	4. FEI Number	Applied For
21 992	5 Clarcona Oco	zeka 26 3925 Clarco	ona Ocree Kd	59-2241172	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	B	City & State .		6. Election Campaign Financing	\$5.00 May Be
23 Orl	Ando, Florida		· Florida	Trust Fund Contribution	Added to Fees
	PID 25 USA	Zip	,	8. This corporation owes or has paid the co	_ ' _ '
24 328			10 USA	Personal Property Tax due June 30.	Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent LIALL EXECUTIVE 5					
	L, FREDDIE F.		l Name		
1	1 LIMPUS ROAD		B2 Street Addr	ess (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32838				tel.	
			63		
			84 City		85 Zip Code
			'	FI	∟ i
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature Typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PT	☐ DELETE	1.1 TITLE		Change Addition
NAME	HALL, FREDDIE F		1.2 NAME		-
STREET ADDRESS	8801 LIMPUS ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY - ST - ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		Change Addition
NAME	HALL, JAMES T.		2.2 NAME		
STREET ADDRESS	8801 LIMPUS ROAD		2 3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2 4 CITY-ST-ZIP		
TITLE	Š	DELETE	3.1 TITLE		Change Addition
NUE	HALL, TERRI I.	. 	3.2 NAME		
STREET ADDRESS	4932 FIJI CIRCLE		3.3 STREET ADDRESS		
Offy-ST-ZIP	ORLANDO FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME		Basely or more than	4.2 NAME		
STREET ADDRESS			4.2 NAME		
CITY-ST-ZIP			· .		
TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	MAN	Change Addition
NAME		C Dittie			C Augusto C Manufulli
			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CTTY+ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		LJ DELETE	6 1 TITLE		☐ Change ☐ Addition
NAE			62 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

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 trustoe 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.