## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 1. Corporation Name

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## DANIEL W. KOIVU 720 MERIDALE AVE ORLANDO FL 32803-4259 US 3. Date Incorporated or Qualified 0/9/23/1983 02/28/1995  2. Principal Place of Business 2a. Mailing Address 4. FET Number Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State 28 Country Zip Country 5. Tour Status Desired 5. Suite, Country 5. Centify See Incorporation of Place of Dualified 0/9/23/1983 02/28/1995  3. Date Incorporated or Qualified 0/9/28/1995  4. FET Number 5. Sp-2320997 Not Applied For 1/9/20/20/28/1995  5. Certificate of Status Desired 1/9/20/20/20/20/20/20/20/20/20/20/20/20/20/	MALIA	A CORPORATION								
720 MERIONLE AVE ORLANDO FL 32800-4579   US	Principal Place	of Business	M	ailing Address					AT BIBOLDE	OLL BEREI MINIO INDI
Principal Place of Business   2a	720 MERIDALE AVE ORLANDO FL 32803-4259			720 MERIDALE AVE						
25   Substant   Subs							09/23/1983			
27	21		—	Mailing Address					$\vdash$	_ <del></del>
28	Suite, Apt. #	, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired			
25   29   36   7   10   10   10   10   10   10   10	City & State		28	City & State						
KOIVU, DANIEL W. 720 MEMDALE AVE ORLANDO FL 32803  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Florida Statutes. It he above nemoci corporation's busined for the purpose of changing its registered afficiency registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thosely accept the epipointment are registered agent, in the State of Florida. Statutes and accept the edipprinent size registered agent. It am or provisions of registered agent. It am or provision and accept the edipprinent are registered agent. It am or provision and accept the edipprinent are registered agent. It am or provision and accept the edipprinent are registered agent. It am or provision and accept the edipprinent are registered agent. It am or provision and accept the edipprinent are registered agent. It am or provision and accept the edipprinent are registered agent. It am or provision and acceptable agent are registered agent. It am or provision and acceptable agent age	Zip <b>24</b>	<b></b> γ ′	29	Zip	h1				under s	199.032,
ROPUL DANIEL W. 720 MERIDALE AVE ORLANDO FL 32803   88   89   89   68   68   89   68   70   89   89   68   68   70   89   89   68   68   70   89   89   69   69   69   69   69   69		<ol><li>Name and Address of Current</li></ol>	t Regis	tered Agent		• • • • • • • • • • • • • • • • • • • •	10. Name and Address of New R	egistered A	gent	
Table		•			81	Name			177	
STREET ADDRESS   STRE					82	Street Addin	ess (P.O. Box Number is Not Acceptab	le)		
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office forms with a discorder the obligations of Section 607,0502, honds Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am registered agent. I am registered office obligations of Section 607,0502, honds Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am registered agent. I am registered office obligation of Section 607,0502, honds Statutes, and accept the obligation of Section 607,0502, honds Statutes, and accept the obligation of Section 607,0502, honds Statutes, and obligation 607,0502, honds Statutes, honds Statutes, honds Statute					83	···				
1. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing as registered office dentiler with, in the State of Florida. Such change was authorized by the composition's incord of directors. I hereby accept the appointment as registered agent. I am registered agent of the obligations of Section 607 0505, Florida Statutes.  SIGNATURE  2. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. THE CAMPE STREET ADDRESS IN 12.  DP DELETE STREET ADDRESS IN 15 THE CAMPE ADDRESS IN 12.  ORLANDO FL 14 OFFICERS AND DIRECTORS IN 12.  ORLANDO FL 14 OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE CAMPE ADDRESS IN 12.  ORLANDO FL 14 OFFICERS AND DIRECTORS IN 12.  ORLANDO FL 14 OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE CAMPE ADDRESS IN 12.  ORLANDO FL 14 OFFICERS AND DIRECTORS IN 12.  ORLANDO FL 14 OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ORLANDO FL 14 OFFICERS AND DIRECTORS IN 12.  ORLANDO F	OFFICIAL	70 TE 32003								
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Separation of the plane of th	11. Pursuant to or registere familiar with	the provisions of Sections 607,0502 d agent, or both, in the State of Florid , and accept the obligations of, Secti	and 60 da. Such on 607.0	7.1508, Florida Statut i change was authoriz 0505, Florida Statutes	es, the above red by the corp	named corpora oration's boar	ation submits this statement for the pur d of directors. I hereby accept the appo	pose of chan pintment as ri	ging its i egisterec	registered office 1 agent. I am
12.	SIGNATURE _	dimphas took a partial as a of reached social	and little it n	need a lete	sa e de la composición					
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further		oodily that the information a motive di-	ditto the a	films, in such many of	64 CITY-SI	I - ZIP				

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 Statutas; and that my name appears in Block 12 or Block 13 if offenged, or on an attachment with an address.

SIGNATURE: SIGNATURE MID TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-96 407 896-0644 Date: Proce 3