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

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

**FILED** May 01 1998 8:00am Secretary of State

DAVID F. ALLEN, P.A.									
Principal Place	a of Business		Mailing Address				1 (68/14)		<b>illi 310</b> 11 1081
,			2431 LEE ROAD						
2431 LEE ROAD 2431 LEE ROAD 200 AND THE STREET									
WINTER PARK FL 32789 WINTER PARK FL 32789							DO NOT WRITE IN THIS	SPACE	<del></del>
US			US				3. Date Incorporated or Qualified		
2. Principal P	lace of Busines	s •	2a. Mailing Add	ess			10/10/1983 4. FEI Number	——————————————————————————————————————	Applied For
21 243	Lee	01	26 2431	Lee	Ro	l	59-2332512	~··+-	Not Applicable
Suite, Apt.		<u></u>	Suite, Apt. #			<u> </u>	5. Certificate of Status Desired	\$8.75	Additional
22	2			27			a, Certificate of Status Desired		Required
City & State	ter Par	rk. Fla.	City & State  28 Winte	r Park	· F	a	6, Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip		Country	Zφ	/   G(   V	Jountry		8. This corporation owes or has paid the c		
24 327	89 25	1 USA	29 327 8 9	30	U	.s.A.	Personal Property Tax due June 30.	_ ′	□No
	9, Name an	d Address of Cur	rent Registered Agent				10. Name and Address of New Registered	i Agent	
ALLEN, DAVIO F									
							Idress (P.O. Box Number is Not Acceptable)		
WINTER PARK FL 32789									
					84	City	F	L  85   Zip	p Code
11. Pursuant	to the provision	s of Sections 607.0	0502 and 607.1508, Flori	da Statutes, the	above	e-named co	orporation 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									
12.	Signature, typied or p		agest and the if applicable AND DIRECTORS		fured Age	nt signature re-	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	SPS IN 12
TITLE	PST	OFFICERO			1 TOTLE		ADDITIONAL OF THE CHAPTER	Change	
NAME	ALLEN, DA	MD F	<del></del>	1	2 NAME				]
STREET ADDRESS	2431 LEE I			1	3 STREET	ADDRESS			}
CITY-ST-ZIP	WINTER PA	ark fl		. 1	4 CiTY-S	I-ZIP			
TITLE			D	LETE 2	1 TITLE			☐ Change	Addition C
NAME				2	2 NAME				
STREET ADDRESS				2	3 STREET	ADDRESS			
CITY-ST-ZIP					4 CITY-S	ST-ZIP	,		T Later
TITLE			[ D	1 1	1 101LE			∐ Change	Addition
NAME					2 NAME	Inneres			}
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP TITLE			D		4. CITY - S 1 TITLE	51 - ZIP		☐ Change	Addition
NAME				1	2 NAME				
STREET ADDRESS				1		ADDRESS			
CITY-ST-ZIP				1	4 CiTY-S				
TITLE	· · · · · · · · · · · · · · · · · · ·		D		1 TITLE			Change	e Addition
NAME				5	2 NAME				
STREET ADDRESS				5	3 STREET	ADDRESS			
CITY-ST-ZIP					4 CITY-S	I - ZIP			
TITLE			D	LETE 6	1 TITLE			Change	e Addition
NAME				6	2 NAME				
STREET ADDRESS				6	3 STREET	ADDRESS			
CITY-ST-ZIP	.6	· · · · · · · · · · · · · · · · · · ·		6	4 CITY-S	I-ZIP			
<b>14. I he</b> reby o	c <b>ertify</b> that the ir	ntormation supplied	a with this filing does not	quality for the	exemp	tion stated	in Section 119.07(3)(i), Florida Statutes. I further	sermy that th	ie 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.