## 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 # G91325

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FILED
Apr 15 1998 8:00am
Secretary of State

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ROY MAPORT BLVD SAFORD R. 22772  BAFORD	Principal Plac	e of Business	Mailing Address			ł
SAMPORD FL 32773  US  3. Date Incorporated of Qualified  3. Date Incorporated of Outside  3. Date I		RT BLVD	PO BOX 697			
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2. Principe Place of Buyiness   2   Applied For   Applied		_			03/14/1984	
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28 32764   25   35   30   4.5   Personal Property Tax due June 30   Ves   No   No   No   No   No   No   No   N	7in	Country				
B. Name and Address of Low Registered Agent TAYLOR, CLFTON I., SR 500 W ARPORT BLVD APT 1508 SANFORD FL 32773  84 City O Shew J. P.L. 85 Jg. Code 4 City O Shew J. P.L. 85 Jg. Code 4 City O Shew J. P.L. 85 Jg. Code 4 City O Shew J. P.L. 85 Jg. Code 4 City O Shew J. P.L. 85 Jg. Code 4 City O Shew J. P.L. 85 Jg. Code 4 City O Shew J. P.L. 85 Jg. Code 4 City O Shew J. P.L. 85 Jg. Code 5 P.O. Box Number is not acceptablely Dec. 5 P.O. Box Number is not acceptablely Dec. 5 P.O. Box Number is not acceptable to the provisions of Sections 607 0507 and 607 1508. Florida Statutos, the above named corporation submits this statement for the purpose of changing its registered 6 city O Shew J. P.L. 85 Jg. Code 6 City O Shew J. P.L. 85 Jg. Code 6 City O Shew J. P.L. 85 Jg. Code 6 City O Shew J. P.L. 85 Jg. Code 6 City O Shew J. P.L. 85 Jg. Code 6 City O Shew J. P.L. 85 Jg. Code 6 City O Shew J. P.L. 85 Jg. Code 6 City O Shew J. P.L. 85 Jg. Code 6 City O Shew J. Shew J. Shall Blood of directors. Thereby accept the abpointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of directors. Thereby accept the appointment as registered 6 City O Shew J. Shall Blood of Code Shall Bloo			トゥー・ランカム(レート	¬ // <		
TATLOR, CLIFTOR I, SP   Solve   Address   PO Box April 1808   SANFORD FL 32773   Street Address   PO Box April 1808   SANFORD FL 32773   Solve   Address   PO Box April 1808   PO Box Ap			11	701		$\neg \neg$
SOO W AIRPORT BLVD APT 1808 SANFORD FL 32773  BY  ONLY  POLICIAN	TAY	LOR CLIFTON L SR		81 Name	Taul - Cliffor. T 50	
APT 1506 SANFORD FL 32773  83				92 Street A	Address (P.O. Roy Number is Net Assessable)	
SANFORD FL 32773    B3				OZ Street A	120 RAILROAD AVE	
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 or registered agent, or both, in the State of Honda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in membral with, and except the object of the purpose of changing its registered agent. I am femiliar with, and except the object of the object of the purpose of changing its registered agent. I am femiliar with, and except the object of the object of the purpose of changing its registered agent. I am femiliar with, and except the object of t				83		$\neg$
11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08. Florida Statutos, the above-named corporation submits this statement for the purpose of changing is 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 and accept the objection of Section 607.0505, Florida Statutos.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  PST  TAYLOR, CLIFTON I. S  13. STREET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  CITY-ST-2P  DELETE  1.1THLE  DELETE  2.1THLE  DELETE  3.1THLE  DE				94 (20)		
office or registered agent, or both, in the State of Forda Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Forda Statute.    Signature	-			City	OSteen FL 3276	$\mathcal{A} \perp$
Agent. term fermiller with, and accept the obligations of. Soction 607.6505, Florida Statules.  SIGNATURE    12.	office or r	egistered agent, or both, in the State of	Florida. Such change was au	thorized by the corp	corporation submits this statement for the purpose of changing its register to the appointment as register.	ed ed
12. OF FICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.   TITLE	agent. I a	m familiar with, and accept the obligation	ons of, Section 607. <b>0505</b> , Flori	da Statutes.		
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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 a 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 amy directs.

CICMATURE.