FILED Apr 16, 2002 8:00 am Secretary of State

5551 CORPORATION								04-16-2002 90157 027 ***150.00						
Principal Place of Business 709 E. COLONIAL DR. ORLANDO FL 32803				Mailing Address 709 E. COLONIAL DR. ORLANDO FL 32803										
2. Principal Place of Business				3. Mailing Address										
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State				City & State			4 . F	50-2622U55				plied For		
Zip Country				Zip	try	5. Certificate of Status Desired \$8.75 Additional Fee Required						fitional d		
	6. Name	and Address of Cur	ent Regis	stered Agent			7. N	7. Name and Address of New Registered Agent						
			<u> </u>			Name								
HARTOG, ALBERT G. 709 E. COLONIAL DR.					Street Address (P.O. Box Number is Not Acceptable)									
ORLANDO FL 32803										<u>-</u>				
•					City	FL Zip Code								
8. The above	named entit	y submits this stateme	nt for the p	purpose of changing its r	egistere	ed office or regis	stered ag	ent, or both,	in the Stat	e of Flori	da.			
SIGNATURE.	Signature, typed	or printed name of registered	agent and title	if applicable. (NOTE:	Registere	d Agent signature requ	uired when re	instating)			DATE			
9. This corporation is eligible to satisfy its intangible Tax filling requirement and elects to do so. (See criteria on back)			$J \perp$	FILE NOW!! After May 1, 200 Make Check Payabi	will be \$550.0		10. Electi Trust	on Campa Fund Cont	-	ncing		May Be to Fees		
11.	`	OFFICERS A	ND DIREC	CTORS	12.		AD	I DITIONS/CH	HANGES T	O OFFIC	FRS AND	DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, RONALD T COLONIAL DR.	NO DINE	☐ Delete	TITLE NAM STRE	i		Difficiency of	MICO I	0.110		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		l l		5.1 ALL (1888)				☐ Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		☐ Delete			<u>-</u>					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	-	Delete				·			·	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. 4		- □ Delete				48				□ Change ·	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-			□ Delete	CITY	E Et address -St-Zip						Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	certify that the	e information supplied	with this f	iling does not qualify for	STRE	ET ADDRESS -ST-ZIP	Section 1	119.07(3)(i),	Florida Sta	tutes. I fo	urther certif	y that the in	or directo	

indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

2002 UNIFORM BUSINESS REPORT (UBR)

H47521

DOCUMENT #

HON - 896 - 665