PROFIT . CORPORATION ANNUAL REPORT

1998

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H89192 (9)

MINUTEMAN PRESS OF SOUTH ORANGE AVE., INC.

		and a second						
Principal Place of Business		Mailing Address				* 100 mm m		
3589 S.ORAN ORLANDO FL		3589 S.ORANGE AVE. ORLANDO FL 32806						
UNLANEO FE	32000					DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						12/06/1985		
2. Principal P	lace of Business	2a. Mading Address				4. FEI Number	Applied For	
21		26	26			59-2643546	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.			\$8.75 Additional		
22		27	27		<b>5.</b> Certificate of Status Desired	Fee Required		
City & State		Cily & State	City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28	28		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip		Country		8. This corporation owes or has paid the o	urrent year Intangible	
24	25	29	30	1		Personal Property Tax due June 30.	XYes ☐ No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registere	d Agent	
NAERT, DEBORAH S. 5045 DELVIN CT ORLANDO FL 32821				81	Name			
				82	Street Address (P.O. Box Number is Not Acceptable)			
-				83				
				84	City		85 Zip Code	
I office or r	to the provisions of Sections 607.05 egisterod agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such cha	nne was auth	orized by	the corpora	poration submits this statement for the purpose alion's board of directors. I hereby accept the a	of changing its registered	
SIGNATURE								
Signature, typed or protest name of registered agent and trie if applicable (NOTE: Registe					int signature requ	red wherere nstating) DATE	ID DIDEOTODO (1) 40	
12.					<sub>T</sub>	ADDITIONS/CHANGES TO OFFICERS A	·	
TITLE			1 1 TITLE			Change Addition		
NAME	NAERT, DEBORAH S.			1.2 NAME				
STREET ADDRESS			13 STREET	ADDRESS				
CITY-ST-ZIP			14 CITY - S	1 · 7)P				
TITLE	<del></del>		21 DILE			Change Addition		
NAME	NAERT, BARBARA			22 NAME				
STREET ADDRESS			2 3 STREET	ADDRESS				
CITY-ST-ZIP	ORLANDO FL			2.4 CITY 9	ST ZIP			
TITLE			ELFTE	3 1 TITLE			Change Addition	
NAME				3.2 NAME				
STREET ADDRESS				3 3 STREET	ADDRESS			
CITY-ST-ZIP				3 4. CHY-5	ST - 71P			
TITLE		D D	ELETE	4.1 TITLE			☐ Change ☐ Addition	

CITY-ST-ZIP 14. Thereby 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 trustee empowered to execute the great 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.

4. 2 NAME

5.1 1111.6

5.2 NAME

6.1 THILE

G.2 NAME

DELLIFE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIF

5.4 C(1Y - S1 - Z(P

4.4 CITY - ST- ZIP

851-8841 NAFOT ILO

Addition

Addition

**FILED** 

Feb 06 1998 8:00am

Secretary of State