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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1998

SIGNATURE 12.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

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CITY-ST-ZIF

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CITY-SI-ZIF

CITY-ST-ZIP

TITLE

NAME

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NAME

DOCUMENT #
1. Corporation Name

(6)

FORTUN	E CAPITAL FUNDING						
Principal Place	of Business	Mailing Address				T TO BITTLE DIDE LINE	
13408 SE 100TH AVE P.O BOX 578 BELLEVIEW FL 32620		13408 SE 100TH AVE P.O BOX 578 BELLEVIEW FL 32620					
						3. Date Incorporate 10/16/1986	
2. Principal Place 21	ce of Business	2a. Mailing Address 26				4. FEI Number 59-273110	
Suite, Apt. #,	, etc.	Suite, Apt. #, etc. 27				5. Certificate of Sta	
City & State		City & State				6. Election Campa Trust Fund Conf	
Zгр 24	Country 25	Zip 29	30 Cou	intry		B. This corporation Personal Proper	
	9. Name and Address of Cu USE, STEVEN T. 8 SE 100TH AVE	irrent Registered Agent		B1 B2	Name	10, Name and Add	
	EVIEW FL 32620			B3	Street Add	ress (F.O. Box Number	
				B4	City		

OFFICERS AND DIRECTORS

KNOUSE, STEVEN T.

13408 SE 100TH AVE

KNOUSE, STEVEN T.

13408 SE 100TH AVE

BELLEVIEW FL

BELLEVIEW FL

FILED Apr 22 1998 8:00am Secretary of State



				-				
DO NOT WRITE Do NOT WRITE Date Incorporated or Qualified	IN THIS	SP	ACI					
10/16/1986								
, FEI Number				Ar	plied	For		
59-2731106						olicable		
. Certificate of Status Desired				. 75 Fee Re				
i. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees						
This corporation owes or has pa Personal Property Tax due June		_	nt ye	_	angib No	le		
, Name and Address of New Re								
	<u> </u>							
P.O. Box Number is Not Acceptate	ole)							
· · · · · · · · · · · · · · · · · · ·								
				7:-				
	FL	_	85	Zip	Code			
on submits this statement for the p board of directors. I hereby accep no reinstating)								
ADDITIONS/CHANGES TO OFFICE	CERS AN	DΕ	IRE	CTOF	RS IN	12		
] Ci	hange		Addition		
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CITY-ST-ZIF 14. Thereby certify that the information supplindicated on this annual report or suprifule officer or director of the corporation of Block 12 or Block 13 if changed and a this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information with the properties due and accurate and that my signature shall have the same logal effect as if made under oath, that I am an error trust to impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

13.

1.1 TITLE

1.2 NAME

21 TITLE

2 2 NAME

3 1 TITLE 3.2 NAME

4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

1.3 STREET ADDRESS.

2.3 STREET ADDRESS

3.3 STREET ADDRESS

3.4. CHY-ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

2. 4 CHTY-ST-ZIP

1.4 CITY-ST-ZIP

DELETE

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SIGNATURE:

Change

Addition