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 # J4(

J40669

(0)

EPWORTH INVESTMENTS, INC.

FILED
Feb 20 1998 8:00am
Secretary of State

EPWONIN INVESTMENTS, INC.							
Principal Place of Business			Mailing Address			# 106/110 9111 81911 89118 91110 81110 8411 84011 84011 84011 81011 91011 91011 91011	
1	PO BOX 140985		PO BOX 140985				
	ORLANDO FL 32814-0985 US		ORLANDO FL 32814-0985 US			DO NOT WRITE IN THIS SPACE	
08			05			3. Date Incorporated or Qualified	
						11/03/1986	
	Principal Place of Business		2a. Mailing Address	, Mailing Address		4. FEI Number Applied For	
21			26			98-0099774 Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.	-		5. Certificate of Status Desired S8.75 Additional	
22			City & State			Fee Required	
City & State			28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
	Zip Country		Zip	_ ' '		8. This corporation owes or has paid the current year Intangible	
24				30			
\vdash		Address of Current R	egistered Agent		1 Name	10. Name and Address of New Registered Agent	
	HOEQUIST, CHAR			Ľ	Name		
	3101 MAGUIRE BLVD SUITE 101 ORLANDO FL 32083			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
	VIEW INV I E UNI	,00		8	3		
				8	4 City	FL 85 Zip Code	
<u> </u>	11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named compration 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.						
St	SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12		OFFICERS AND D		13.	Mount of Street or	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
_	le PD		☐ DELE T E	1.1 TITLE		Change Addition	
NA		CHARLES E.		1.2 NAM	E		
st		HRE BLVD SUITE 10	01	1.3 STRE	ET ADDRESS		
CI	ry-st-zip Orlando F	<u> 1</u>		1.4 C(TY	-ST-ZIP		
TIT			☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
N/A	ME PERKINS, S			2.2 NAM			
ŞT	STREET ADDRESS 3101 MAGUIRE BLVD SUITE		01	2.3 STREET ADDRESS			
	ry-st-zip ORLANDO F	<u>L</u>	DELETE	2. 4 CITY		☐ Change ☐ Addition	
ı	LE		☐ DELE te	3.1 TITLE		☐ Change ☐ Addition	
1	ME			3.2 NAM			
1	REET ADDRESS				ET ADDRESS		
$\overline{}$	IY-ST-ZIP		DELETE	3.4. City 4.1 Title	- ST- ZIP	Change Addition	
ı						Unango Las reserves	
ı	ME REET ADDRESS			4. 2 NAM	ET ADDRESS		
ı				4.4 CITY			
	IY-ST-ZIP LE		DELETE	5.1 TITLE		Change Addition	
	ME			5.2 NAM		· -	
	REET ADDRESS				ET ADDRESS		
	Y-ST-ZIP			5.4 CITY			
TITLE			DELETE			Change Addition	
	ME			6.2 NAM	E		
Į .	REET ADORESS			6.3 STRE	ET ADORESS		
CII	Y-ST-ZIP			6.4 CiTY	- ST- ZIP		
14	14. I hereby 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 carporation or the receiver or tested empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if granged or on an attachment with an address.							