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 # 1. Corporation Name

J41911

(5)

CD ONE, INC.

FILED Apr 20 1998 8:00am Secretary of State

_	PF

Principal Place	Place of Business Mailing Address							
C/O JOSEPH J. GARDNER C/O JOSEPH J. GARDNER 2487 ALOMA AVE 2487 ALOMA AVE								
WINTER PARK	FL 32792	WINTER PARK FL 32792			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
Principal Pl	lace of Business	2a. Mailing Address			11/13/1986 4. FEI Number		r. i fee	
21 2479			748		1	 	oplied For	
Suite, Apt.		26 P.O. Box 1	110		59-2744349	\$8.75	ot Applicable	
22	, , , , , , , , , , , , , , , , , , , 	27			5. Certificate of Status Desired		equired	
City& State	• 0	City & State			6. Election Campaign Financing	\$5.00	•	
	ER PARK, FC	28 WINTER PAR	c. 1230	290	Trust Fund Contribution		to Fees	
Zip	Country		Country		8. This corporation owes or has paid the cu	rrent year Int	tangible	
24 52	1982 25	^{Zp} 32790 30			,] Ño	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
· GAI	rdner, Joseph J.		81 Nar	ne				
248	7 ALOMA AVE		82 Stre	et Addres	ss (P.O. Box Number is Not Acceptable)			
WIN	WINTER PARK 32789			Onder reduces (1.0. Box regimber to recording to				
			63					
			84 City	,		85 Zip (Code	
	A		City		FL	_ 65 210	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, t	he above nam	ed corps	ration submits this statement for the purpose o	of changing it	ts registered	
agent. La	egisteupo agent, or both, in the State c m f ami liar with, and accept the obligat	ions of, Section 607.0505, Florida	a Statutes.	corporano	ration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as	registered	
SIGNATURE	1 start () Oa	id -	bugh	X	farmer 4/7	98		
	Signature, typed or printed name of registered agent		gister Agont sign	rure required	d when reinstating) OATE	*************************************		
12,	OFFICERS AND		18.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	DSV	☐ DELE NE	1.1 TITLE			L Change	☐ Addition	
NAME	GARDNER, ROBERT N.		1.2 NAME				j	
STREET ADDRESS	2487 ALOMA AVE		1.3 STREET ADDRE	SS			}	
CITY-ST-ZIP	WINTER PARK FL	L politic	1.4 CITY-ST-ZIP			T 0	A datition	
TITLE	DPT AADOMED AAADOM A	☐ DELETE	2.1 TITLE	`		Change	Addition	
NAME	GARDNER, JOSEPH J.		2.2 NAME				-	
STREET ADDRESS	2487 ALOMA AVE		2.3 STREET ADDRE	SS				
CITY-ST-ZIP	WINTER PARK FL	DELETE	2. 4 CITY-ST-ZIP			Change	- Addition	
TITLE		L_1 DELETE	3.1 TITLE			L. Change	☐ Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRE	SS				
CITY-ST-ZIP		☐ DELETE	3.4. CITY - ST- ZIP			Change	☐ Addition	
TITLE			4.1 TITLE			- Change	L AGGIRON	
NAME			4. 2 NAME	_				
STREET ADDRESS			4.3 STREET ADDRE	SS				
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP			Change	Addition	
TITLE		☐ DELETE	5.1 TITLE			CH Change	L Madition	
NAME			5.2 NAME	_				
STREET ADDRESS			5.3 STREET ADDRE	SS				
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP			Change	☐ Addition	
TITLE		☐ DETEIF	6.1 TITLE			∟ ∪nange	L Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRE	SS				
CITY-ST-ZIP			6.4 CHY-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 deporation 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 an address

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