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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **J65239**

1. Corporation Name

| neanuc | CORPORATION | | | | | | |
|--|---|---------------------------------------|--|----------------------|--|-----------------------|----------------------|
| Principal Plac | ce of Business | Mailing Address | | | | <u> </u> | j dib il 1001 |
| SUITE 2810. 20 | 00 S. ORANGE AVENUE | SUITE 2810, 200 S. ORANGE | AVENUE | | · | | |
| P.O. BOX 2168 P.O. BOX 2168 | | | | | | | |
| ORLANDO FL 32802 ORLANDO FL 32802 | | | | | DO NOT WRITE IN THIS S | PACE | * . • |
| | | | | | 3. Date Incorporated or Qualifed 04/02/1987 | | |
| 2 Principal P | Place of Business | 2a. Mailing Address | · ·· · · · · · · · · · · · · · · · · · | | 4. FE! Number | Applia | |
| 21 26 | | | | | . 59-2910568 | <u> </u> | ed For opplicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | \$8.75 Addi | |
| 22 27 | | | | | 5. Certifcate of Status Desired | Fee Requi | |
| City & State City & State | | | • | | 6. Election Campaign Financing | \$5.00 Ma | av Be |
| 28 | | | | | Trust Fund Contribution | Added to F | |
| Zip | | | | , | 8. This corporation owes the current year Intar | ngible | |
| 24 | 25 | | 30 | | Personal Property Tax. | Yes 🗆 | No |
| | 9. Name and Address of Curre | nt Registered Agent | | T | 10. Name and Address of New Registered A | gent | |
| HAD | TIEV CADE W/ ID | | 81 | Name | | | |
| | TLEY,CARL W.,JR. | | 82 | Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| SUITE 2810 200 S. ORANGE AVENUE ORLANDO FL 32801 | | | | | the second of th | . C. J. N. 7 . 2. F15 | District |
| | | | 83 | | · · · · · · · · · · · · · · · · · · · | 的問題 | |
| ONL | ANDO FL 32001 | | 84 | City | | 85 Zip Cod | ie |
| , | | | | ľ | FL | | |
| office or r agent. I a | registered agent, or both, in the State im familiar with, and accept the oblig | e of Florida. Such change was aut | horized by | the corporation | oration submits this statement for the purpose of chon's board of directors. I hereby accept the appoint | ment as registe | lered |
| SIGNATURE | Signature, typed or printed name of registered age | ent and title if applicable. (NOTE: R | tegistered Agen | nt sionature require | d when reinstating) . DATE | | |
| 12. | OFFICERS A | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AND | DIRECTORS | IN 12 |
| TITLE | PD | ☐ DELETE | 1.1 TITLE | | | | ☐ Addition |
| NAME | Baghaffar, adel | | 1.2 NAME | | · | | |
| STREET ADDRESS | 200 S. ORANGE AVE, #2810 | | 1.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | ORLANDO FL | | 1.4 CITY- ST | T-ZIP | | | |
| TITLE | VST | ☐ DELETE | 2.1 TITLE | | | Change [| ■ Addition |
| NAME | HARTLEY, CARL W., JR. | | 2.2 NAME | | | | |
| STREET ADDRESS | , | | 2.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | ORLANDO FL | | 2. 4 CiTY-S | T-ZIP | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | [| | Change [| ☐ Addition |
| NAME . | | | 3.2 NAME | | | | |
| STREET ADDRESS | | | 3.3 STREET | ADDRESS | | 1 . 140. 22 | -Ng(3) |
| CITY-ST-ZIP | | | 3.4. CITY-S | T-ZIP | | | 414 () () |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | Change [| Addition |
| NAME | | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-\$1 | - ZIP | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | • | Change [| Addition |
| NAME | | | 5.2 NAME | | • | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | ··· | | 5.4 CITY-ST | -ZIP | • | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | [| Change [| ☐ Addition |
| NAME | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | |

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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Feb 18, 1999 8:00am

Secretary of State

02-18-1999 90060 003 ***150.00