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 #

J94002

(9)

CDN - SOUTHERN INVESTMENTS, INC.

FILED)
Feb 11 1998	8:00am
Secretary of	f State



Principal Place of Business Mailing Address							E SAURITO BILA TOTEL DIDIT DONIN DONIN DININ DININ DISIN DIRIN DEBU DEBUT DEBUT DIBIT DIBIT			
DENNY JOHN 375 8 BUMBY ORLANDO FL	/ AVE			3	DENNY JOHNS 175 S BUMBY AVE DRLANDO FL 3280					DO NOT WRITE IN THIS SPACE
US	•			Ü	J\$					3. Date Incorporated or Qualified
										09/21/1987
2. Principal P	lace of Busin	1088		2a	, Mailing Addres	S				4. FEI Number Applied For
21				26						59-2864014 Not Applicable
- Suite, Apt	#, et c.			27	Suite, Apt. #, et	ic.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	e				City & State					6. Election Campaign Financing \$5.00 May Be
23				28						Trust Fund Contribution
Zip		Countr	У		Z ip	c	ountry	/		8. This corporation owes or has paid the current year Intangible
24		25		29		30				Personal Property Tax due June 30. 🛮 Yes 🔲 No
	9, Name	and Addre	ss of Currer	nt Regis	stered Agent					10. Name and Address of New Registered Agent
JOH	HNS, DENN	ΙΥ					81	Na	ame	
375 S. BUMBY AVENUE ORLANDO FL 32803							82	St	reet Addres	ss (P.O. Box Number is Not Acceptable)
Uni	DANDO FL	32003						83		
								Cı	ity	FL 85 Zip Code
11. Pursuant (to the provisi	ions of Sec	tions 607.050	2 and 6	607.1508, Florida	Statutes, the	abov	L e-nai	med corpor	ration submits this statement for the purpose of changing its registered
office or re agent. I a	ogi s tered ag m fam iliar wi	ent, or bolf th, and acc	n, in the State opt the oblig	of Flori ations o	da Such change f, Section 607.05	was authori: 05, Florida S	zed by tatute	y the s.	corporation	on's board of directors. I hereby accept the appointment as registered
SIGNATURE										
	Signature typed		e of registered agr			(NOTE Registe		ent sig	mature required	d when reinstating) ADDITIONS/CHANICES TO DEFICE DE AND DIDECTORS IN 12
12. TITLE	VP.		TICE HS AN	DIAL	DELE		TITLE			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME		RY, JAME	:e e				NAME			Compage Control
		NASTERY					STREET	ADDE	orce	
STREET ADDRESS		CITY FL	יווו							
CITY-ST-ZIP TITLE	D	. 011111			DELE		CITY - S	1 - 212		Change Addition
NAME	ากแมด	DENNY								
	JOHNS, DENNY 1816 CROWN POINT WOODS CIR							2.2 NAME 2.3 STREET ADDRESS		
STREET ADORESS	OCOEE		ITI TIOODS) UIN						
TITLE	OCOEC !	r c			☐ DELE		1 CITY - :	51 · ZIF	<u> </u>	☐ Change ☐ Addition
NAME							NAME			_ overige _ regulot
								ADINA	oree	
STREET ADDRESS						I -	STREET	-		
CITY-ST-ZIP TITLE					☐ DELE		CITY-S	ot - ZiF	<u></u>	☐ Change ☐ Addition
					_ 000					C Strange C Appliful
NAME CINECT ADDRESS							NAME	ABoo	orec	
STREET ADDRESS							STREET			
CITY-ST-ZIP				 	DELE		CITY - S	ı - ZIP		☐ Change ☐ Addition
TITLE					ب مددد					
NAME							NAME			
STREET ADDRESS							STREET		ì	
CITY-ST-ZIP					DELE		CITY-S	ı - ZIP	<u> </u>	☐ Change ☐ Addition
TITLE					ר"ו מנוג		TITLE			C cisulite C Madida
NAME							NAME			
STREET ADDRESS							STREET			
CITY-ST-ZIP	- 49 - 41 - 4 O	- i- (an an ann Caret a	tati alite 4	Oliver de se se -	6.4	CITY-S	I - ZIP		notice 110.07/2Vi). Florida Statular Liberther partify that the information

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 is 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 footporation or the receiver or trustoc ompowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if Thanged, or on an attachment with an address.