FR.	<u>.a</u>	50 (IF DISSOLVED, MINIMUM AMOUNT DUE T	THENT OF STATE	·
	ORATION A	(%)	ITMENT OF STATE ne Harris	1 P.(. £ £)
	L REPORT	Secretary		SECTION OF CORPORATIONS
19	999 `	DIVISION OF C	ORPORATIONS	
OCUM Corporation N	ENT # J97 (110		99 SEP 27 PM 1: 10
		-	•••	
EASIMAN	INVESTMENT AND	MANAGEMENT CORPORATION	N	
incipal Place of	of Business	Mailing Address		וופון מוקום ורפונס אובים וופרם וופרום ורפון שלמון וערופה וופרון וופרום ווופר חוופר שתוופקו ו
BASS LAKE DR IARY FL 32713		45 BASS LAKE DR Debary FL 32713		
,		US		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 10/06/1987
Principal Plac	ce of Business	2a. Meiling Address		4. FEI Number Applied For
	Y LINK DR.		470468	60 75
Suite, Apt. #, i	etc	Suite, Apt. #, etc.		Certificate of Status Desired Section
City & State	N. 1006 El	City & State	200 (1	6. Election Cempaign Financing \$5.00 May Be
4414	MONICOE PC	28 LAKL MON	Country	Trust Fund Contribution Added to Fees 8. This corporation owes the current year
3274	17 [25]		30	Intangible Personal Property. Yes No
	9. Name and Address of	of Current Registered Agent	81 Name	10. Name and Address of New Registered Agent
	, RICHARD B.			
	S. HWY 17-92			Address (P.O. Box Number is Not Acceptable)
CASSE	LBERRY FL 32707		83	
			84 City	FL 85 Zip Code
Pursuant to office or reg	the provisions of sections gistered agent, or both, in familiar with, and accept	. 607.0502 and 607.1508, Florida Statutes the State of Florida. Such change was at the obligations of, section 607.0505, Florida	s, the above-named uthorized by the cor rida Statutes.	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SNATURE	gnature, typed or printed name of reg	gistered agent and little if applicable (NO	TE: Registered Agent signa	ure required when reinstating) DATE
-		CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
í á	ACTAIAN RADDADA	L_∫ DELETE I	1.1 TITLE 1.2 NAME	400003006304
				-10/05/9901100009
E	K DIOGLINE DB 1	PO 150X 4 104615		
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ET ADORESS DE ST-ZIP	I S DASS LAKE DR — (DEBARY FL- JILLE PELSITEOT	PO 150X 4 104615	21 TITLE	****550.00 ****550.0
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6.3 STREET ADDRESS

407-444-0477 Daytime Phone #

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 bestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if the right, or if an attainment with an address.

SIGNATURE:

SIGNATURE

Daytime Phone #

STREET ADDRESS