FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K18043

(5)

Principal Place 250 PARK AVE STE - 200 WINTER PARK US	SOUTH FL 32789 ace of Business #, etc.	1388	4. 5.	3. Date Incorporated or Qualified Q3/15/1988 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired S. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution		dded to Fees
Zip	Country	Zip	Country	8.	This corporation has liability for		der s. 199.032,
24	25	29	30			Yes X No	
	9. Name and Address of Current	negistered Agent	B1 Nan		Name and Address of New Re	gistered Agent	
	IA, DIEGO J.						
	Park ave south - 200		82 Stre	et Address (F	P.O. Box Number is Not Acceptal	ole)	
	- 200 Ter Park FL 32789		83	***************************************		· · · · · · · · · · · · · · · · · · ·	
****	ILIT MULTIC GETOG		94 00		·	1221	7:- Cada
			84 City	,		FL B5	Zip Code
SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation Solution typister provid same checkstered repair OFFICERS AND	If and title # applicable. (NO	orida Statutes, TE. Registered Agent signa 13.	ature required whe		DATE	
TITLE	CD	☐ DELETE	1.1 TITLE			Ch	ange 🔲 Addition
NAME	VEITIA, DIEGO J.		1.2 NAME				
STREET ADDRESS	250 PARK AVE SOUTH / STE -	200	1.3 STREET ADDRES	ss			
City-St-ZiP	WINTER PARK FL 32789		1.4 CITY - ST - ZiP		······································		
TITLE	VSD	DELETE	2.1 TITLE			∐ Ch	nange
NAME	SAKER, STEPHEN	•	2.2 NAME				
STREET ADDRESS	250 PARK AVE. SOUTH, SUITE	200	2.3 STREET ADDRES	SS			
CITY - ST - ZIP	WINTER PARK FL 32789	DELETE	2.4 CITY-ST-ZIP			Ch	nange
TITLE	POT	☐ bereie	3.1 TITLE			L., 011	ange LI Additi
NAME STREET ADDRESS	MICELI, JEROME F. 250 PARK AVE. SOUTH, STE. 1	200	3.2 NAME 3.3 STREET ADDRES	ec			
DITY-ST-ZP	WINTER PARK FL 32789	-00	3.4. City-St-Zip	~			
THUE	CONTRACT CARACLE OF OR	DELETE	4.1 TITLE			Ch	iange 🔲 Additi
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET ADDRES	ss			
CITY - ST - ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Ch	nange 🔲 Additi
NAMé			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRES	ss			
CITY-ST-ZIP		Decem	5.4 CITY-ST-ZIP				
TITLE		☐ DEŁETE	6.1 TITLE]		☐ Ch	nange L. Additi
NAME CZDCEZ ADODECS			6.2 NAME	ec l			
STREET ADORESS			6.3 STREET ADDRES	35			
CITY-ST-ZIF 14. I do heret	by certify that the information supplied	with this filing does not qual	6.4 CITY-ST-ZIP lify for the exemption	n stated in S	ection 119.07(3)(i). Florida Statuto	s. I further certif	y that the
informatic	n indicated on this annual report or s fficer or director of th e c orporation or n Block 12 or Block 13 if phanged <u>, o</u> r	upplemental annual report is the receiver or trustee empor	true and accurate a wered to execute the	and that my s	ignature shall have the same leg	al effect as if mai	de under oath; t

SIGNATURE:

PEOURED Jerome F. Miceli 01/22/97

FILED

Feb 06 1997 8:00am

Secretary of State

407/629-1400

Daytime Phone #