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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	CONT.	DIVISION	OF CORPORA	110185				
1. Corporation	JMENT# K on Name TIONS BEST LAND	(22566	(9)						
VIILA	HONO DEGI LANE	JOCAPING, INC	,) 1803:0111 EM 11040 1:0011 DULLE 1	HILL a d hur dha hi au	Lir Bab ar Bab ar	Diğir diğir idel
Principal Plac	ce of Business	Λ	Vailing Address						
751 WILL BARBER RD. KISSIMMEE FL 34744			751 WILL BARBER RD. KISSIMMEE FL 34744						
2 Principal F	Place of Business					3. Date Incorporated or Qualific 05/04/1988		te of Last I	
1	Tace of Business	 	 Mailing Address 			4. FEI Number			Applied For
Suite, Apt.	#, etc.	26	Suite, Apt. #, etc.			59-2889430			Not Applicable
2		27				5. Certificate of Status Desired			5 Additional Required
City & Stat	te		City & State			6. Election Campaign Financing			00 May Be
Zip	Country	28	Zip			Trust Fund Contribution		Adde	d to Fees
i)	25	29	zιμ	Countr 30	ry	8. This corporation has liability		ax under s	199.032,
	9. Name and Addre	ss of Current Regis	stered Agent	1301		Florida Statutes 10. Name and Address of New		Anni	
A1411 mm				81	1 Name		rogisteled	Agent	
717 E. C	HARRY J.			82	2 Street Add	dress (P.O. Box Number is Not Accep	table\		
	JAN 51. MEE FL 34744						rabiej		
MOOHER	UCC (C 34/44			83	3	"			·
				84	City			85 Zi	p Code
Pursuant : or register	to the provisions of Section red agent, or both, in the t	ons 607.0502 and 60 State of Florida, Such	7.1508, Florida Statu	tes, the above-	named corpo	ration submits this statement for the	FL purpose of cha	anging its i	egistered office
IGNATURE	uri, and accept the obligat	tions of, Section 607,	0505, Florida Statute	s.		vation submits this statement for the pard of directors. I hereby accept the a	purpose of chappointment as	anging its i registered	registered office Lagent. Lam
IGNATURE _	Signature, typed or printed name o	tions of, Section 607,	0505, Florida Statute	tes, the above- zed by the corp s. OTE: Registered Age		ed when reinstating)	purpose of chi ppointment as	registered	agent. I am
IGNATURE _ 1. ILE	Signature, typed or printed name o	lions of, Section 607. I registered agent and title if a	0505, Florida Statute	S. OTE: Registered Age	int signature require	and or directors. Thoroby accept the a	DUITPOSE OF CHI POPOINTMENT AS DATE FFICERS AND	registered	PRS IN 12
GNATURE	Signature typed or printed name of OF D HARKEMA, ROBER	ions of, Section 607, registered agent and title if a FFICERS AND DIREC	0505, Florida Statute applicable (Ni	S. OTE: Registered Age	nt signature require	ed when reinstating)	DUITPOSE OF CHI POPOINTMENT AS DATE FFICERS AND	DIRECTO	agent. I am
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