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 # K28637

(2)

LEVENTHAL & SLAUGHTER, P.A.

FILED						
Mar 26 1998 8:00am						
Secretary of State						

Principal Place of Business Mailing Address				1 10010111 DES LIBER FOILE BAICO IIIII 1001 BIERI BIERI GIDII DYDYL GIDII DEGET 1661	
DO NOT WRITE IN TH	HIS SPACE				
US		US		3. Date Incorporated or Qualified	
				07/11/1988	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2899542	Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Regulred
22		27			`
Uity & State	•	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zin	Country	28 Zip	Country	Tradit did Contraditor	
Zip 24	├ ¬ ′	29	30	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
24	25 Name and Address of Curre		30	10. Name and Address of New Register	
1 67	ENTHAL, ROBERT A.		81 Name		
	NORTH ORANGE AVENUE				
			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	te 700 .ando fl 32801		B3		
Una	ANDO FL 32001				
			B4 City	,	FL 85 Zip Code
44 Ourcugnt t	to the provisions of Sections 607.05	02 and 607 1508. Florida Statu	ites, the above-named c	corporation submits this statement for the purpos	se of changing its registered
office or re	egistered agent, or both, in the Stat	e of Florida. Such change was	authorized by the corpo	oration's board of directors. I hereby accept the	appointment as registered
agent, I ar	m familiar with, and accept the obli	gations of, Section 607.0505, F	iorida Statutes.		
SIGNATURE .	Signature, typed or printed name of registered as	root and title if applicable (NC	TE: Registered Agent signature re	equired when reinstating) DA	TE
12,		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	LEVENTHAL, ROBERT A.		1.2 NAME		
STREET ADDRESS	111 NORTH ORANGE AVEN	ue, suite 700	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	·	1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SLAUGHTER, HARRISON, JF) .	2.2 NAME		
STREET ADDRESS	111 NORTH ORANGE AVEN		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY - \$1 - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - 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	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		
14. I hereby c	certify that the information supplied	with this filing does not qualify	for the exemption stated	d in Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information is le under oath; that I am an
officer or o	director of the corporation or the re-	ceiver or trustee empowered to	execute this report as r	d in Section 119.07(3)(i), Florida Statutes. I futule nature shall have the same legal effect as if mad required by Chapter 607, Florida Statutes; and t	that my name appears in
Block 12 (or Block 13 if changed, or on an att	acriment with an address.		1. 1	