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

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 07, 1999 8:00 am Secretary of State 04-07-1999 90037 046 ***150.00

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DOCUI 1. Corporation	MENT # K78125		a de Y				
	ALING CENTER, INC.						2. 3.
		APPER DE MENTE MENTE MARIE MAN LE MENTE DE LE CONTRACT PRINCIPAL DE CAPACITÀ DE LA CONTRACT DE CAPACITÀ DE CAP MAN LE CONTRACT MENTE DE LA CONTRACT DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ D L'ANDRE DE CAPACITÀ DE LA CONTRACT DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ DE CAPACITÀ DE L'ANDRE DE CAPACITÀ DECLARATION DE CAPACITÀ DE			* **********************************		
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Principal Place		Mailing Address		in the second of the second of			**************************************
C/O CYNTHIA I	L. O'DONNELL	C/O CYNTHIA L. O'DONNELL					k
505 SO ORANGE AVE.					DO NOT WRITE IN THIS S	SPACE	
SARASOTA FL	34236	SARASOTA FL 34236			3. Date Incorporated or Qualifed	7	
					04/06/1989	,,	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	-	oplied For
21		26			65-0107872		ot Applicable Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		equired
City & State	<u> </u>	City & State			6 Flaction Campaign Financing		May Be .
City_& State	The section of the se	28			6. Election Campaign Financing		to Fees
Zip	Country	Zip	Country	/	8. This corporation owes the current year Inta	ngible	
24	25					ŬYes	ΜNo
1	9. Name and Address of Currer	, / 1			10. Name and Address of New Registered A	gent	
A15-4	ONNELL OVALTURA I		81	Name			
O'DONNELL, CYNTHIA L. 505 S. ORANGE AVE. SARASOTA FL 34236			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	•	
SAN	A301A FL 34230		83				
			84	City	FL	85 Zip	Code
		D COT 4FOD Florido Clabilla	the above	n named som		hanging it	s registered
office or n	egistered agent, or both, in the State	of Florida. Such change was auth	orized by	the corporation	oration submits this statement for the purpose of con's board of directors. I hereby accept the appoin	tment as r	egistered
agent.;l a	m familiar with, and accept the obliga	itions of Section:607.0505, Fiorida	ı Ştatutes		معاميسيا بالمستولية ويساد والمستدان المستدانية	_ 	-
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re-	gistered Age	nt signature required	d when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	P DELETE O'DONNELL, CYNTHIA L.		1.1 TITLE 1.2 NAME			Change	Addition
NAME							
STREET ADDRESS	2330 MIETAW DRIVE		1.3 SYREET ADDRESS				ļ
CITY-ST-ZIP	SARASOTA FL	□ priete	1.4 CITY-5	ST-ZIP		Change	Addition
TITLE		☐ DELETE	2.1 TITLE			Containge	
NAME			2.2 NAME	T ADDRESS			1
STREET ADDRESS			2.3 STREE				
CITY-ST-ZIP TITLE			3.1 TITLE	31-ZIP		Change	Addition
NAME:			3.2 NAME	e 🛶 · 🖘	والمستدر فراع المراز المحامة وهيمان بدلورهم		
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	1			
TITLE	☐ DELETE 4.		4.1 TITLE	-		Change	☐ Addition
NAME	4.2		4. 2 NAME				
STREET ADORESS	4.33		4.3 STREE	ET ADDRESS			
CITY-ST-ZIP	****		4.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS	?{			T ADDRESS			
CITY-ST-ZIP			5.4 CITY-S 6.1 TITLE	SI-ZIP		☐ Change	Addition
TITLE		C DETEIL	6.2 NAME				
NAME				T ADDRESS			
STREET ADDRESS			6.4 CITY-S				1
CITY-ST-ZIP					Section 119.07(3)(i), Florida Statutes. I further cert	if that the	information

Intereox 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attackment with an address, with all other like empowered.

SIGNATURE:

941-366-1110 Daytime Phone #