## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

LEGG	MENT # K828 n Name Z DANCE ACADEMY, INC	<b>\</b> -	3)	A TO A A A LITTU O DE LA CALLER TRA COLLINA DE LA	RI BINI BIBNI BIBNI BIBNI BIBNI BIBNI BIBNI BIBNI BIBNI
Principal Place	e of Business	Mailing Address			
1226 S. BERMUDA AVENUE KISSIMMEE FL 34741		1226 S. BERMUDA AVENUE KISSIMMEE FL 34741			A STATE OF THE PARTY OF THE PAR
				3. Date Incorporated or Qualified 04/24/1989	3a. Date of Last Report 05/01/1995
2. Principal Pl. 21	ace of Business	2a. Mailing Address 26		4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc		59-2953826	Not Applicat
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  23  Zip		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country 25	Zip <b>29</b>	Country 30	8. This corporation has hability or in	ntangible tax under s 199.032,
	9. Name and Address of Curr	rent Registered Agent	30	Florida Statutes Yes  10. Name and Address of New Re	No
55444			81 Name	THE PART OF THE PA	eAleraten Wählif
	EEK, LISA MARIE LONY COURT		82 Street Ac	ddress (P.O. Box Number is Not Acceptable	10
	IEE FL 34758		63		<del></del>
1	EE ( E 01/00		[63]		•
			84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.05	02 and 607 1509. Florida Cto	atutes the share and		
SIGNATURE	i, and accept the obligations of, Se	ection 607.0505, Florida Statu	utes.	poration submits this statement for the purporation submits this statement for the purporation of directors. Thereby accept the appoint	oose of changing its registered offi intment as registered agent. I am
SIGNATURE 5	i, and accept the obligations of, Se signature, typed or printed name of registered ag-	oction 607.0505, Florida Statu ent and life if applicable ND DIRECTORS	atutes, the above named corporated by the corporation's butes.  [NOTE Registered Agent signature required.]	ured when reinstaling)	cose of changing its registered offi intment as registered agent. I am
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SIGNATURE: SIGNATURE AND TYPED OR MINITED NAME OF SIGNING OFFICER OR DIRECTOR DELLE DRAWNECK 4/5/96 407-846-4365