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

FILED May 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L36393 (1)565 INVESTORS, INC. Principal Place of Business Mailing Address P.O. BOX 940658 P.O. BOX 940658 MAITUAND FL 32704-0658 MAITLAND FL 32784-0658 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/14/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2991410 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country 240 Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SMITH, RANDALL C ESQ BERRY J. WALKER 750 MAITLAND AVE Street Address (P.O. Box Number is Not Acceptable) 82 MAITLAND FL 32751 83 84 City 32751e MAITLAND 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objection 607.0505, Florida Statutes. BERRY J. WALKER 3/24/98 SIGNATURE and the dapplicable (NOTE: Registered Agent signature required when reinstating) DATE OF LICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. DELETE Change Addition TITLE PD 1.1 TILLE RUTH, MOGUL NAME 1.2 NAME 861 WEST MORSE BLVD. STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 1.4 City - ST - ZiP DELETE Change Addition TITLE 2.1 TITLE NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-\$1-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 53 STREET ADDRESS

14. Thereby 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 supplicated 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 changed, or on an attachment with an address.

54 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Micon

DELETE

2/20/00

Change

Addition