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

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

(0)

PILLAH	BRYTON HOLDING COM	PANY, INC.								
Principal Place	e of Business	Mailing A	ddress				1911 GGG 11191 (GHI PLOY) 1811	iu frai Grafi Við	** BIBIT <b>BIBI</b> T	
9236 BENTLEY PARK CIRCLE ORLANDO FL 32819 US		9236 BENTLY PARK CIRCLE ORLANDO FL 32819 US				DO NOT WE	ITE IN THIS	SDACE		
					3. Date Inc	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
							7/1989	~		
2. Principal Pl	lace of Business	2s. Mailin	g Address	· · · · · · · · · · · · · · · · · · ·		4. FEI Nur			1	Applied For
<u>1</u>		26				59-	2985452		N	ot Applicable
Suite, Apt.	#, etc.	Suite,	Apt. #, etc.				ate of Status Desired			Additional
2	BTR-11-14	27				<b>4.</b> Continue				Required
City & State	Ð	City &	State				Campaign Financing			May Be
3 Zip	Country	28 Zip		Cour	ntru		and Contribution			to Fees
a - "	25	29		30	··· <b>y</b>		rporation owes or has al Property Tax due Ju			ntangible No
<u> </u>	9. Name and Address of Curre		\gent	1901			and Address of New			117
PIL	LAR PROPERTIES		· · · · · · · · · · · · · · · · · · ·		81 Name			7	<del></del>	·····
9236 BENTLEY PARK CIRCLE					B2 Street Ad	ddress (P.O. Boy	Number is Not Accep	tahla)		
	LANDO FL 32819				DE SINGE A	duless (F.O. BOX	Number is Not Accep	lable)		
				ſ	83			·		
				-	B4 City				85 Zip	Code
					J.,			FL	.   55  - 7	0000
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.150i	8, Florida Statu	tes, the ab	ove-named c	orporation submit	s this statement for th	e purpose o	changing	its registered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida, Suc pations of, Section	th change was on 607.0505, Fl	authorized orida Statu	I by the corpo utes.	oration's board of	directors. I hereby ac	cept the app	f changing pointment a	its registered is registered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig Signature typed or profed name of negatived ag	e of Florida, Suc pations of, Section	th change was on 607.0505, Fl	authorized orida Statu	I by the corpo utes.	oration's board of	directors. I hereby ac	DATE	pointment a	s registered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  PDS	e of Florida Suc gations of, Soction and and their applica	th change was on 607.0505, Fl	authorized orida Statu IE Registered	by the corportes.  Agent signature re	oration's board of	directors. I hereby acc	DATE	pointment a	PRS IN 12
office or re agent. I er SIGNATURE 12.	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  PDS  DUPONT, WILLIAM, III	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu IE Registered 13.	I by the corporates.  Agent signature re	oration's board of	directors. I hereby acc	DATE	DIRECTO	PRS IN 12
office or reagent. I are SIGNATURE  12.  13.  NAME	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu IE Registered 13. 1.1 Til 1.2 NA	I by the corporates.  Agent signature re	oration's board of	directors. I hereby acc	DATE	DIRECTO	PRS IN 12
office of reagent. I an agent. I an SIGNATURE  12.  13.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  PDS  DUPONT, WILLIAM, III	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu  IE. Registered  13.  1.1 TI3.  1.2 NAI  1.3 STF  1.4 CIT	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	oregistered  ORS IN 12  Addition
office or reagent. I en agent. I en SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu IE. Registered 13. 1.1 Tif 12 NAI 1.3 STF 1.4 CIT 2.1 Tif	Agent signature re  LE  ME  REET ADDRESS Y-ST-ZIP  LE	oration's board of	directors. I hereby acc	DATE	DIRECTO	PRS IN 12
office of reagent. I en agent. I en SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Stature E. Registered 13. 1.1 Tif 12 NAI 1.3 STF 1.4 CIT 21 TIT 22 NAI	Agent signature re LE ME REET ADDRESS Y-ST-ZIP LE ME	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	oregistered  ORS IN 12  Addition
office of reagent. I en agent. I en signature  12.  13.  13.  13.  13.  13.  13.  13.	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized corida Statu  E Registered  13.  1.1 Tif  12 NAI  1.3 STF  1.4 CIT  21 TIT  22 NAI  23 STF	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	oregistered  ORS IN 12  Addition
office of reagent. I en agent. I en SIGNATURE  12.  13.  13.  13.  13.  13.  13.  13.	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized corida Statu IE Registered 13. 1.1 TH 12 NAI 1.3 STF 1.4 CIT 22 NAI 23 STF 2 4 CI	Agent signature re LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	DRS IN 12 Addition
office or re agent. I er agent. I er signature  12. Title hame street address city-st-zip title street address city-st-zip title hame street address city-st-zip title	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu IE Registered 13. 1.1 III 12 NAI 1.3 STF 1.4 CIT 22 NAI 2.3 STF 2.4 CI 3.1 III	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  LE  LE  LE  LE  LE  LE  LE  LE  L	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	DRS IN 12 Addition
office or reagent. I er agent. I er agent. I er signature  12.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu IE Registered 13. 1.1 Tif 12 NAI 1.3 STF 1.4 CIT 2.1 Tif 2.2 NAI 2.3 STF 2.4 CI 3.1 Tif 3.2 NAI 3.2 NAI 3.3 NAI 1.3 STATE 3.2 NAI 3.3 NAI 1.3 STATE 3.3	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  ME  REET ADDRESS  IY-ST-ZIP  LE	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	DRS IN 12 Addition
office or re agent. I er agent. I er agent. I er signature  12.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu FE Registered 13. 1.1 III 12 NAI 1.3 STF 2.1 TIT 2.2 NAI 2.3 STF 2.4 CF 3.1 TIT 3.2 NAI 3.3 STF	Agent signature re  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-S1-ZIP  LE  ME  REET ADDRESS  REET ADDRESS	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	DRS IN 12 Addition
office or reagont. I er agont. I er agont. I er signature  12.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	th change was on 607.0505, FI	authorized orida Statu FE Registered 13. 1.1 III 12 NAI 1.3 STF 2.1 TIT 2.2 NAI 2.3 STF 2.4 CF 3.1 TIT 3.2 NAI 3.3 STF	Agent signature re  LE  ME REET ADDRESS LY-ST-ZIP	oration's board of	directors. I hereby acc	DATE	DIRECTO Change	ORS IN 12 Addition Addition
Office OF TE AGGENT. I ET AGGENT. I ET AGGENT ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE	authorized orida Statu FE Registered 13. 1.1 III 12 NAI 1.3 STF 2.1 TIT 2.2 NAI 2.3 STF 2.4 CF 3.1 TIT 3.2 NAI 3.3 STF 3.4 CF 3.4 CF	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change	ORS IN 12 Addition Addition
Office OF TE AGGENT. I ET AGGENT. I ET AGGENT. I ET AGGENT ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME NAME NAME	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE	authorized orida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 2.1 TIT 2.2 NAI 2.3 STF 2.4 CF 3.1 TIT 3.2 NAI 3.3 STF 3.4 CF 4.1 TIT 4.2 NAI	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change	ORS IN 12 Addition Addition
Office Or re agent. I er agent. I er agent. I er signature  12.  112.  1111.  1	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE	authorized orida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 1.4 CIT 2.1 TIII 2.2 NAI 2.3 STF 1.3 STF 1.4 CIT 3.1 TIII 3.2 NAI 3.3 STF 1.4 CIT 4.1 TIF 4.2 NAI 4.3 STF 4.3 STF 4.3 STF	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  ME  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  ME  ME  ME  ME  ME  ME  ME  ME	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition
Office Or re agent. I er agent. I er agent. I er SIGNATURE  12.  111.  111.  ITILE  IT	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE	authorized orida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 1.4 CIT 2.1 TIII 2.2 NAI 2.3 STF 1.3 STF 1.4 CIT 3.1 TIII 3.2 NAI 3.3 STF 1.4 CIT 4.1 TIF 4.2 NAI 4.3 STF 4.3 STF 4.3 STF	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition
Office OF TE AGONT. I ET AGONT	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE  DELETE	authorized orida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 2.1 TIF 2.2 NAI 2.3 STF 2.4 CF 3.1 TIF 3.2 NAI 3.3 STF 4.1 TIF 4.2 NAI 4.3 STF 4.4 CF 4.4 CF	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition
Office Or re agent. I er agent. I er agent. I er signature  12.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE  DELETE	authorized corida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 1.4 CIT 22 NAI 2.3 STF 2.4 CIT 3.1 TIT 4.2 NAI 3.3 STF 4.1 TIT 4.2 NAI 3.3 STF 4.1 TIT 4.2 NAI 4.3 STF 4.4 CIT 5.1 TIT 5.2 NAI	Agent signature re  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS  IY-ST-ZIP  LE  REET ADDRESS	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition
Office OF reagont. I er agont.	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE  DELETE  DELETE	authorized corida Statu  IE. Registered  13.  1.1 TIT  12 NAI  1.3 STF  1.4 CIT  21 TIT  22 NAI  23 STF  2.4 CIT  31 TIT  32 NAI  33 STF  4.1 TIF  4 2 NAI  4.3 STF  4.1 TIF  4 2 NAI  5.3 STF  5.1 TIT  5.2 NAI  5.3 STF  5.4 CIT	Agent signature re  LE  ME REET ADDRESS Y-ST-ZIP  LE  ME REET ADDRESS IY-S1-ZIP  LE  ME REET ADDRESS IY-S1-ZIP  LE  ME REET ADDRESS Y-S1-ZIP  LE  ME REET ADDRESS Y-ST-ZIP  LE  ME REET ADDRESS Y-ST-ZIP  LE  ME REET ADDRESS Y-ST-ZIP	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change Change	PRS IN 12 Addition Addition Addition Addition
Office OF FE AGGENT. I EF AGGEN	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE  DELETE	authorized corida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 1.4 CIT 2.2 NAI 2.3 STF 1.4 CIT 1.1 III 1.4 CIT 1.5 C	Agent signature re  LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition Addition
Office OF FE AGENT. I EF AGENT	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE  DELETE  DELETE	authorized corida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 2.1 III 2.2 NAI 3.3 STF 4.1 III 4.2 NAI 4.3 STF 4.1 III 5.2 NAI 5.3 STF 5.4 CII 6.1 TII 6.2 NAI 6.2 N	Agent signature re  LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS Y-ST-ZIP LE  ME ME REET ADDRESS Y-ST-ZIP LE  ME M	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change Change	PRS IN 12 Addition Addition Addition Addition
Office OF TE AGGENT. I ET AGGEN	egistered agent, or both, in the State in familiar with, and accept the oblig  Signature typied or printed name of ingustered ag  OFFICERS AN  POS  DUPONT, WILLIAM, III  9236 BENTLEY PARU CIRCI	e of Florida Suc gations of, Section and the it applica ND DIFIECTORS	DELETE  DELETE  DELETE  DELETE  DELETE	authorized corida Statu F. Registered 13. 1.1 III 12 NAI 1.3 STF 1.4 CIT 2.2 NAI 2.3 STF 1.4 CIT 1.5 C	Agent signature re  LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS	oration's board of	directors. I hereby acc	DATE	DIRECTO Change Change Change Change	PRS IN 12 Addition Addition Addition Addition

inducated on this armual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a 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.

La de Pier SIGNATURE: Wieles

**FILED** 

Apr 13 1998 8:00am

Secretary of State