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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANI	NUAL REPORT 1997	Secretary of State DIVISION OF CORPORATIONS			Secretary of State				
DOCUMENT # L56857 1. Corporation Name 1. Corporation Name Principal Place of Business 4515 VILLAGE WOOD DR ORLANDO FL 32818 ORLANDO FL 32835-2729									
US		US				3. Date Incorporated or Qualified 03/08/1990	1	te of Last F 1/1996	Report
	il Place of Business	2a. Mailing Address			4. FEI Number	f	pplied For		
·····	pt. #, etc	26 Suite, Apt #, etc.				59-2996919 5. Certificate of Status Desired		\$8.75	ot Applicable Additional lequired
22 City & S 23	late	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zipi 24	Country 25	7 p	30	intry		8. This corporation has liability for in		tax under s	
L	Name and Address of Curr ATEL, JAY	ent Registered Agent		B1	Name	10. Name and Address of New Reg	glatered A	gent	
45	515 VILLAGE WOOD DRIVE RLANDO FL 32835			82 83	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
11. Pursua	ant to the provisions of Sections 607.0	502 and 607.1508, Florida Sta	itules, the a	B4 bove	City	poration submits this statement for the pation's board of directors. I hereby accep	FL urpose of	11.	Code its registered
agent SIGNATUR		ligations of Section 607.0505,	Florida Sta	tutes	s.	and a board of disploid, thereby accep	i iio appi	on to none to	, registered
	Signature, typind or printed name of registered			d Age	nt signature requ	ured when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDC AND	DIDECTO	DC IN 10
12. Tilf	D OFFICERS A	ND DIRECTORS DELETE	13. 1.11	TIF		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	PATEL, JAY	heart Park T	1.2 N						
STREET ADDRES			1		ADDRESS				
CITY-SI-ZIP TITLE	ORLANDO FL VP	DELETE	1.4 C		T-ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	SAGAR, BHULA	La bereit	2.7 N		1			C. Onlingo	L ROGILO
STREET ADDRES	ARAMA SEE BEL ARE OF		1		ADDRESS				
CHY-ST-ZIP	ORLANDO FL 32817		2 4 0	HTY-5	ST - ZIP	ey.			
TITLE		DELETE	3.1 TI					Change	Addition
NAME			3.2 N		1000000	•			
STREET ADDRES	SS				ADDRESS				
City -SE-Zi? Title		DELETE	3.4. C		ST- ZIP			Change	Addition
NAME	1	the section	4.21						
STREET ADDRES	ss				ADDRESS				
C-TY-ST-ZIP					T-21P				

6.4 CITY-ST-ZIP CITY - \$1 - 76° 14. I do hereby certify that the information supplied with this fling 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 changed, or on an attachment with an address.

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

63 STREET ADDRESS

SIGNATURE:

THILE NAMi

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

City - St - 205

DELETE

DELETE

407 352 8383

Change

FILED

Apr 18 1997 8:00am

Addition

Addition