## FILE NOW: FILING FEE AFTER MAY 18T IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L93248

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## FILED Apr 06 1998 8:00am Secretary of State

Principal Place of Business 830 CARTER ROAD SUITE 208 WINTER GARDEN FL 34787 US		Mailing Address  930 CARTER ROAD SUITE 208 WINTER GARDEN FL 34878 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  08/10/1990
2. Principal Place of Business 21		2a. Mailing Address 26				4. FEI Number Applied For 59-3037740 Not Applicabl
Suite, Apt. #, etc.		Suite, Apt #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	)	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country Zip Co		30 Co.	ıntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
<del>-:</del>	9. Name and Address of Curren					10. Name and Address of New Registered Agent
HEI	NDERSON, DONALD			81	Name	
265	5 ASHVILLE ST LANDO FL 32818			82	Street Address (P.O. Box Number is Not Acceptable)	
OII.	D4100 12 32010			83		
				84	City	FL 85 Zip Code
11. Pursuant in office or reagent. I as SIGNATURE						oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered age			d Ager	nt signature required	······································
12.	OFFICERS ANI	D DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Additio
NAME STREET ADDRESS	HENDERSON, DONALD 2655 ASHVILLE ST ORLANDO FL	_ otten	1.2 N 1.3 ST	AME Treet	ADDRESS	
TITLE NAME STREET ADDRESS	VO HENDERSON, KATHLEEN 2655 ASHVILLE ST	D DELETE 2.1 ENDERSON, KATHLEEN 2.2 855 ASHVILLE ST 2.3 RLANDO FL 2.1		1.4 CHY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 TITLE		Change Addition
CITY-ST-ZIP TITLE	ORDARDO FL					☐ Change ☐ Addition
NAME			3.1 II		}	
STREET ADDRESS	<b></b>				ADDRESS	
CITY-ST-ZIP	I		- 1	ITY-S	1	
TITLE NAME	☐ DELÉTE 4.1 TI 4.2 T		TLE		Change Addition	
STREET ADDRESS CITY-ST-ZIP				IREET A	ADDRESS 1-Zip	
TITLE		DELETE	5.1 Ti	TLE		☐ Change ☐ Addition
NAME			5.2 N/	AME	ŀ	
STREET ADDRESS			5.3 \$1	reet /	ADDRESS	
CITY-ST-ZIP				TY-ST	· ZIP	
TITLE		☐ DELETE	6.1 T/			☐ Change ☐ Addition
NAME STREET ADDRESS			6.2 N/ 6.3 ST		ADDRESS	
CITY-ST-ZIP		$\Lambda$		ITY-ST		
indicated officer or officer of the Block 12 o	enity that the information/supplied wa on this annual report or supplemental director of the corporation or the reco or Block 13 if changot or on an attac	IIII this tring goes noy arfallify all annual report is the and ac siver or ruskie entrovered to chment with an address.	tor the execute to execute to	empl d tha this ri	ion stated in S it my signature eport as requir	Section 119.07(3)(i), Florida Statutes. I further certify that the information e shall have the same legal effect as if made under oath; that I am an red by Chapter 607, Florida Statutes; and that my name appears in Heur