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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M19632

(2)

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Mar	18	1998	8:00am				
Se	crei	tary o	f State				

CENTU	JRY THREE ORLANDO FLO	DRIDA, INC.					
Principal Plac	e of Business	Mailing Address				(B) B(B() 615() B)B() B(B)(E10(1 A16(1 102)
20803 BISCA	YNE BLVD.	20803 BISCAYNE BLVD					
8TE. 200		200			DO NOT WRITE	C IN THIS STACE	
AVENTURA FL 33180		AVENTURA FL 33180			DO NOT WRITE IN THIS SPACE		
US		US			3. Date incorporated or Qualified		
					08/20/1985		
	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2578336		Not Applicable
Suite, Apt.	₩, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional
22		27					Required
City & Stat	0	City & State			6. Election Campaign Financing		0 May Be
23	· · · · · · · · · · · · · · · · · · ·	28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Country		8. This corporation owes or has pa		
24	25	_ ,	30		Personal Property Tax due June		□ No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Ro	egistered Agent	
KC)rn, gary a.		61 1	Name			
	803 BISCAYNE BLVD		82 5	Street Addres	ss (P.O. Box Number is Not Accepta	ble)	
20				0	od (r. je) een rienaen le rier recopia	.2.0,	
	ENTURA FL 33180		83		·		
***	5,110,11,12,00,00		<u> </u>				
			84	City		FL 85 Z	ip Code
11. Pursuant office or sagent. La	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obliging familiar with the section of the control of the contro	602 and 607.1508, Florida Statute le of Florida. Such change was a gations of, Section 607.0505, Flø	es, the above-nuthorized by the rida Statutes	named corpo he corporatio	ration submits this statement for the n's board of directors. I hereby acce	purpose of changing opt the appointment	g its registered as registered
SIGNATURE							
	Signature, typed or printed name of registered as	gent and title it applicable (NOTE	: Registered Agent s		(when reinstating)	DATÉ	
12.	OFFICERS AI	gent and title it applicable (NOTE	Registered Agent s			DATE CERS AND DIRECT	ORS IN 12
12. Title	OFFICERS AF	gent and title it applicable (NOTE	: Registered Agent s 13. 1.1 TITLE		(when reinstating)	DATÉ	ORS IN 12
12.	OFFICERS AT POT CIBELLA, ROSS M.	pent and title if applicable (NOTE NO DIRECTORS	Registered Agent s		(when reinstating)	DATE CERS AND DIRECT	ORS IN 12
12. Title	OFFICERS AT PDT CIBELLA, ROSS M. 9339 CYPRESS COVE DRIVE	pent and title if applicable (NOTE NO DIRECTORS	: Registered Agent s 13. 1.1 TITLE	signature required	(when reinstating)	DATE CERS AND DIRECT	ORS IN 12
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indicated on this annual report or supplier shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the purifyer of rules empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change, of on an artifying in address

SIGNATURE

The same of the sa

ROSS M. CIBELLA, PRESIDENT 3/9/98

(407) 354-1000