## **FILED** Apr 27, 1999 8:00 am Secretary of State

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## **PROFIT** CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

	1999		DIVISION OF	CORPORAT	TONS						
DOCUI	MENT # M9		NC.								
Principal Place	n of Business	Mailie	ng Address			11	<b>BB(BB</b> iff 310 tollet 10010 Deten 10	III YUBI UIDI GII	AST MERBIC MINISTE	Light givin inns	
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US	33040	DESTI	N FL 32541				DO NOT WR	TE IN THIS	SPACE		
		ŲS				3. Date I	ncorporated or Qualifed				
						09/08	3/1988			ŀ	
2. Principal Pl	tace of Business	2a. M	lailing Address			4. FEI N			A	plied For	
21		26	·			65-00	71732		N	Applicable	
Suite, Apt.	#. etc.		uite, Apt. #, etc.						\$8.75	Additional	
22		27				5. Certifo	ate of Status Desired		Fee Re	> puired	
City & State			ity & State			6. Election	n Campaign Financing		\$5:00	-Vay,Be	٠, ٠
23		28				Trust	Fund Contribution	<u> </u>		to Fees	
Zip	Country	Z	ip	Countr	<del>,</del>	8. This c	orporation owes the cur-	rent year Inta	ngible		
24	25	29		30		Perso	nal Property Tax.		Yes	□No	
	9. Name and Address	of Current Register	ed Agent			10. Name	and Address of New	Registered /	Agent		
				81			_			ĺ	
	IALT, GREGORY S			82	C Stroot Ad	harla D	enise Carr (Number is Not Accept	able)			
737 (	HWY 98 E			] 02			way 98 Eas		:+- #		
4				83	1		<del></del>	<del></del>	L-CC-T	•——	
DEST	TIN FL 32541			L.	<u> </u>				T-21 70	-	
				84	City L	estin,	FL	FL	85 Zip		
11 Duceusot	to the provisions of Section	ns 607.050.2 and 607.	1508 Florida Stat	ites, the above	e-named co	rporation subm	ts this statement for the	purpose of	changing its	registered	
Tr. Fulsumi											
office of t	egistered agent or both, in	the State of Florida.	Such change was	authorized by	the corpora	ition's board of	directors. I hereby acce	pt the appoin	itment as re	gistered	
office of n	to the provisions of Saction egistered agent or both, in m familiar with, and accept	n the State of Florida. t the obligations of, St	Such change was ection 607.0505, F	authorized by orida Statute:	the corpora s.	ition's board of	directors. I hereby acce	pit the appoin	ilment as re	gistered	
office of n agent. (a SIGNATURE	July 11's	\ <u></u>						pt the appoin	atment as re	clistered	==
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SIGNATURE	Signature, typed or privided in time of OFF	\ <u></u>	picable (NO	E. Registered Age		ured when menutating	<del></del>	DATE			(11/98)
SIGNATURE  12. TIILE	Signature, 190ad or previod in true of OFF	Tegissered ager ; and title if ap	olicable (NO ORS	E. Registered Age		ured when menutating	<del></del>	DATE	DIRECTO	RS IN 12	34 (11/98)
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I here by certify that the information supplied with this filing does not qualify or 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 per the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appriars in Block 12 or Block 13 if changed, or on any attachment with an address, with all other like empowered.

GHING OFFIC TO DIRECTOR