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NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9400005647 (2)

| SOS SERVING BORNADO FL 32008 S. Principal Place of Business S. Suria, Apr. #, etc. Suria, Apr. #, e | BRIDG | ES OF AMERICA - THE PO | LK BRIDGE, INC. | | |
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| Sulte, Apt 9, etc. Sulte, | 2. Principal P | face of Business | 2a. Mailing Address | | CO 75 A 4 distan |
| City & State Country 2 | 21 | | | | o. Certificate of Status Desired |
| City & State City & State | | #, etc. | <u>├</u> | | |
| 21p Country 22p Country 20p Country 20p Country 20p | | 8 | | | |
| 20 Country 20 | 23 | - | ⊢ | | |
| COSTANTINO, FRANK 2055 MERCY DR ORLANDO PL 32808-5629 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of charging list registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 617.0503. Florida Statutes, the above-named corporation submits this statement for the purpose of charging list registered agent. I am familiar with, and accept the obligations of, Section 617.0503. Florida Statutes. SIGNATURE Bignutus, typed or priesd name of registered agent, and familiar with, and accept the obligations of, Section 617.0503. Florida Statutes. SIGNATURE Difficers AND DIRECTORS 13. Title DO | Zip | Country | | | 8. This corporation owes or has paid the current year intangible |
| COSTANTINO, FRANK 2055 MERCY DR ORLANDO FL 32808-5629 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lits registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered state agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing lits registered agent, or board of directors. I hereby accept the appointment as registered state agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing lits registered agent, or board of directors. I hereby accept the appointment as registered state agent, and the proporation submits this statement for the purpose of changing lits registered agent, or board of directors. I hereby accept the obligations agent agent and state agent, and applications agent agen | 24 | | | 30 | |
| COSTANTINO, FRANK 2055 MERCY DR ORLANDO FL 32808-5629 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligations of, Section 617 0503, Florida Statute, agent I am familiar with, and accept the obligation as a political statute, agent I am familiar with, and accept the obligation as a political statute, agent I am familiar with, and accept the obligation of the political statute, agent I am familiar with an accept the appointment agent active and active agent I am familiar with an accept the obligation of the politic statute and accept the obligation of the politic statute and accept the appointment agent accept the accept accept the appointment accept accep | | 9. Name and Address of Curre | nt Registered Agent | A1 Nem | |
| 2055 MERCY DR ORLANDO FL 32808-5629 85 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Statute of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, are familiar with, and accept the Obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature Typed or printed name of aquatemed agent and stile if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D OFFICERS AND DIRECTORS IN 12. TITLE D OCITY-ST-ZIP ORLANDO FL 32819 13. SIRRET ADDRESS CITY-ST-ZIP ORLANDO FL 32819 14. CITY-ST-ZIP D ORLANDO FL 32817 16. Change Addition MAKE BROWN, DON 32. NAME BROWN, DON 33. SIRRET ADDRESS CITY-ST-ZIP ORLANDO FL 32817 18. CITY-ST-ZIP D ORLANDO FL 32817 19. Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OF | COSTAN | ITIMO EDANIV | | | |
| ORLANDO FL 32806-5629 63 | | | | 82 Stree | et Address (P.O. Box Number is Not Acceptable) |
| 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered officing or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent, a manufacture with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE COSTANTINO, FRANK STREET ADDRESS STREET ADDRESS STREET ADDRESS ORLANDO FL 32819 TITLE D CRANDO FL 32819 TITLE D CRANDO FL 32817 TITLE T | | | | 83 | |
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Secretary of State