FILE	NOW: FILING FE	E AFTER MAY	1ST IS	550.00	_ F	ILED	
PROFIT CORPORATION ANNUAL REPORT			IDA DEPARTME		May 07	1998.8	.00ar
			Secretary of		May 07 1998 8:00an		
1	998	DIV			Secretary of State		
OCUN Corporation	IENT # P920	00000108	3 (0)				
	HOOL CHILD CARE, IN	NC.					
incipal Place	of Business	Mailing Addre	55			OENTE DOERN EORN CONCENTION	NGTUT NGHI HUUT
HIB HALE STREET 4416 HALE : SARASOTA FL 34233 SARASOTA							
					DO NOT WRI 3. Date Incorporated or Qualifie	TE IN THIS SPACE	
					10/23/1992		
	ce of Business	24. Mailing Ad	dress WENDA	VENECCIA	4. FEI Number 65-0364831		Applied For Not Applicable
Suite, Apl #,		Suite, Apt.			5. Certificate of Status Desired		5 Additional Regulred
City & State		27 City & Stat			6. Election Campaign Financing	\$5.0	Neguireo 10 May Be
<u>SAKA</u> Zip	SOTA FL Country	28 <b>5777</b> Zip	ASOTA	Country	Trust Fund Contribution 8. This corporation owes or has		d to Fees
3424	25 9. Name and Address of C	20 342	4-2 30		Personal Property Tax due Ju 10. Name and Address of New	ne 30. 🔲 Yes	No No
SCO.	T, PHILIP J		•	81 Name D	HILP J. SCOTT		
4416	HALE STREET			82 Street Add	ress (P.O. Box Number is Not Accep		
SAM	SOTA FL 34233			83	quenida vener		
	$\sim$			84 City	RACerrol	FL 85 2	p Code
Pursuant to	the provisions of Sections 60	7.0502 and 607.1508, Fic	rida Statutes, ti	ne above-named corr	poration submits this statement for th		j its registered
agent. I am	Istered agent, or boin, in the Ismiliar with, and accept the	oblidate s Section 60	ange was autho )7.0505, Florida	Statutes.	poration submits this statement for the tion's board of directors. I hereby ac		as registered
	nature, types or printed near or reporter			istered Agent signature requi		-/ 26/ 48 DAT	
	D OFFICERS	S AND DIRECTORS		<b>13.</b> 1.1 TITLE	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTO	
AE	SCOTT, PHILIP	_		1.2 NAME			-
EET ADDRESS	4416 HALE STREET SARASOTA FL 34233			1.3 STREET ADDRESS 1.4 CITY - ST-ZIP			
r-ST-ZIP E	D		DELETE	2.1 TITLE		Change	e 🗌 Addition
WE	SCOTT, ELISABETH			2.2 NAME			
EET ADDRESS	4416 HALE STREET SARASOTA FL 34233			2.3 STREET ADDRESS 2. 4 City - St - Zip			
E				3.1 TITLE		Change	e 🗌 Addition
AE EET ADDRESS				3.2 NAME 3.3 STREET ADDRESS			
-ST-ZIP				3.4. CITY-ST-ZIP			
E .				4.1 TITLE 4. 2 NAME		Change	e L] Addition
EET ADDRESS				4.3 STREET ADDRESS			
r-st-zip	·····			4.4 CITY - ST-ZIP			a datisian
.E AE		Ļ		5.1 TITLE 5.2 NAME		Change	a 🛄 Addition
EET ADDRESS				5.3 STREET ADDRESS			
(+ST+ZIP E	·			5.4 CITY-ST-ZIP 6.1 TITLE		Change	e 🛄 Addition
ut i				62 NAME			
EET ADDRESS		$\frown$		6.3 STREET ADDRESS			
Y-ST-ZIP	tify that the information supple	ed with this filing doos no	ot qualify for the	exemption stated in	Section 119.07(3)(i), Florida Statutes	. I further certify that th	he information
Indicated on	this annual report of suppler	mental annual report is the	e and accurate	and that my signatu	re shall have the same legal effect a uired by Chapter 607, Florida Statute	s it made under oath; i	inat I am an
officer or dir	ector of the corporation of the Block 13 if changed, or on a	a receiver or trustee emp	owereonto exec	ute this report as req	uired by Chapter 607, Fiorida Statute	s; and that my name a	appears in

and the second second