FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

2a. Mailing Address

WINTER PARK FL 32789-2165

1801 LEE RD

STE 308

26

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

WINTER PARK FL 32789

SIGNATURE:

1801 LEE RD

STE 306



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200007014 (3)

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Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zipi Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ARONOFF, LEN 1801 LEE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 306** 83 WINTER PARK FL 32789 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prior of name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)DELETE DITLE 1.1 TITLE Change Addition LANDIS, JOSEPH NAME 1.2 NAME STREET ADDRESS 1801 LEE RD, #301 1.3 STREET ADDRESS WINTER PARK FL 32789 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - \$1 - 702 2 4 CITY-ST-ZIP DELETE THUE 31 TITLE Change Addition NAME 32 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-S1-7/2 34. CITY-ST-ZIP DELETE THEF 4.1 TITLE ☐ Change Addition NAME 4 2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-7/P 4.4 CITY-ST-ZIP DELETE 100 F 51 TITLE Change Addition NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-7 P 54 CITY+ST-ZIP DELETE Change Addition 1-11 F 61 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block ment with an address.

FILED Mar 17 1997 8:00am Secretary of State

Date Incorporated or Qualified	3a Date of Last Report

03/12/1996

Applied For

Not Applicable

11/23/1992

59-3154517