ANUVLE REPORT 1998 Decletery diale Decletery diale Decletery diale Decletery diale Decletery diale Decletery diale Decletery diale Decletery diale Secretary of State Secretary of State Secretary of State Secretary of State Decletery diale Secretary diale Secretar		PROFIT RPORATION		ARTMENT OF STATE	May 01	1998 8:	:00a
Opcode Rouse       Austing Address         Opcode Rouse       Maning Address         By A Double Rouse       Austing Address         By A Double Rouse       Austing Address         By A Double Rouse       Austing Address         Phologial Place of Business       Austing Address         Phologial Place of Business       2a. Maining Address         Phologial Place of Business       2a. Maining Address         Phologial Place of Business       2a. Maining Address         2a       State Address         Phologial Place of Business       2a. Maining Address         2bits Address       2bits Address         2bits Address       2bits Address         2bits Address       2bits Address         2bits Address       2bits Address         2bits Address of Vortrent Registered Address       2bits Address of Vortrent Registered Address         2bits Address of Vortrent Registered Address       2bits Address         2bits Addre	ANNUAL REPORT		Secre	tary of State	_		
LEASE CAR U.S.A., INC.			<u>en 1</u> >				lace
			00012001 (3	)			
Addition of Designed         Mailing Address           Bit On OPARKE ELSSON TRAIL SSMMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit On OPARKE ELSSON TRAIL SSMMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit On OPARKE ELSSON TRAIL SSMMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit On OPARKE ELSSON TRAIL SSMMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit On OPARKE ELSSON TRAIL SSMMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit On OPARKE ELSSON TRAIL SSMMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit On OPARKE ELSSON TRAIL SSMMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit OPARKE ELSSON TRAIL SSMME FL 9774         500 NO FWRTE IN THIS SPACE           Bit OPARKE ELSSON TRAIL SSMMEE FL 9774         500 NO FWRTE IN THIS SPACE           Bit OPARKE ELSSON TRAIL SSMME FL 9774         500 NO FWRTE IN THIS SPACE           Bit OPARKE ELSSON TRAIL SWMEE FL 9774         500 NO FWRTE IN THIS SPACE           Bit OPARKE ELSSON TRAIL SWMEE FL 9774         200 NO FWRTE IN THIS SPACE           Bit OPARKE FL 9774         COUNTRY           Bit OPARKE FL 9774         200 NO FWRTE IN THIS SPACE           Bit OPARKE FL 9774         200 NO FWRTE IN THIS SPACE           Bit OPARKE FL 9774         200 NO FWRTE IN THIS SPACE           Diff CT 201 NT FL SWMEE FL 9774         200 NO FWRTE IN THIS SPACE <td< th=""><th></th><th></th><th></th><th></th><th></th><th></th><th></th></td<>							
Stanuer E FL 3774     KISSIMURE FL 3774       Principal Place of Business     2.6. Mining Address     4. FEI Number       Do Not WRITE IN THIS SPACE     3. Date Incorporation Of Dualified       Status Apr. 4. etc.     3. Date Incorporation Of Dualified       Dirty & State     2.6. Mining Address       Principal Place of Business     2.6. Mining Address       State, Apr. 4. etc.     5.000 Apr. 8. etc.       Dirty & State     2.0. Contriv       Page 2     2.0. Contriv       Dirty & State     2.0. Contriv       Page 2     2.0. Contriv	•		0	SSOM TRAIL	n (AMI)SAN 198 novia Havi Adiv anını da		U D I W I J W W I
Principal Place of Business       2a. Multing Address       4. FEI Number       Applied Formation         Suite, Apr. 4. etc.       S					DO NOT WRITE	IN THIS SPACE	
Principal Place of Business       2a.       Mailing Address       4. FEI Number       Appleted For_ S9-3165156       Appleted For_ S9-3165156         Solle, Apt #, elic       27       Solde, Apt #, elic       59-3165158       Molt Appleteded France         City & State       City & State       6. Election Campaign Financing Trust Fund Condition owes or has paid the current year Interplate Parsonal Property Tax due June 30.       56.00 May 56 Added to Frees         Zip       Country       8. Election Campaign Financing Trust Fund Condition owes or has paid the current year Interplate Parsonal Property Tax due June 30.       86.00 May 56 Added to Frees         Zip       Country       8. The condition owes or has paid the current year Interplate Parsonal Property Tax due June 30.       87.00 May 56 Added to Frees         WINTER PARK RL       61       Name and Address of Ourrent Registered Agent       61         HEINWERL R L 243 W. PARK AVE. SUITE 201 WINTER PARK RL       61       Name of Molt Parsonal Property Parsonal Property Parsonal					1		
Suite. Apt. #. etc.       Istric. Apt. #. etc.	Principal Pi	lace of Business	2a. Mailing Address			App	olied For
27     27     6. Certificate or Status District     Fise Required       28     City & Status     28     Added to Fees       29     28     30     11. Exection Carreating Financible       29     29     30     11. This Conclusion owne or has paid the current year Intanzible       20     28     30     10. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       HEINKEL, R L     24.3 W. PARK AVE.     28     Status Difference     10. Name and Address of New Registered Agent       WINTER PARK FL     11. Name of Address of New Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       WINTER PARK FL     28     29.0     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       WINTER PARK FL     28     29.0     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       WINTER PARK FL     28     29.0     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       WINTER PARK FL     28     29.0     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       WINTER PARK FL     28     29.0     10.0     10.0     10.0       Bart Address of Decinic 607 0000 and f07 tible Condof of tible concolution t	ulte Ant	# atc			59-3165158	¢0 75 .	
Zet         True Fund Contribution         Added to Fees           Sp         Courtiny         20         This corporation over or hus paid the current yet manaphilo           g         Name and Address of Current Registered Agent         10         Name and Address of Current Registered Agent           HEINKEL R L         243 W. PARK AVE.         243 W. PARK AVE.         10. Name and Address of Neurophysics         26           SUITE 201         WINTER PARK PL         10. Name and Address of Neurophysics         10. Name and Address of Neurophysics         10. Name and Address of Neurophysics           WINTER PARK PL         10         10. Name and Address of Neurophysics           WINTER PARK PL         11         11         10. Name and Address of Neurophysics         10. Name and Neurophysics         10. Name and Neurophysics         10. Name and Neurophysics         10					5. Certificate of Status Desired		
DD       Country       74       Country       B. This coupration over on the paid the current year Intemptibe         g. Name and Address of Current Registered Agent       10. Name and Address of Hew Registered Agent       10. Name and Address of Hew Registered Agent         HENKEL, R L       243 W. PARK AVE.       10. Name and Address of New Registered Agent       11. Name and Address of New Registered Agent         HENKEL, R L       243 W. PARK AVE.       10. Name and Address of New Registered Agent       11. Name and Address of New Registered Agent         Year Data       10. Name and Address of New Registered Agent       11. Name and Address of New Registered Agent         WINTER PARK FL       41       Name (Poly New	City & State	8			, , , ,		
9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent         HEINKEL, R L       243 W. PARK ARE.         SUITE 201       WILLIAMANER         WINTER PARK FL       81         Pursuant to the provisions of Sections 607.05.02 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of change is section for 500.050. Forder Statutes, the above-named corporation submits this statement for the purpose of change is section for 500.050. Forder Statutes, the above-named corporation submits this statement for the purpose of change is section for 500.050. Forder Statutes, the above-named corporation submits this statement for the purpose of change is section for 500.050. Forder Statutes, the above-named corporation submits this statement for the purpose of change is section for 500.050. Forder Statutes, the above-named corporation submits this statement for the purpose of change is section for 500.050. Forder Statutes, the above-named corporation submits this statement for the purpose of change is section for 500.050. Forder Statutes, the appointment as registered agent is at the state of addicate.         Nature       WILLIAMANDON, JOSEPH M       11.111/L       12.1111/L         200 N. ORANGE BLOSSOM TRAIL       12.911/L       13.3111/L       12.401/C         Indexes       23.3111/L       11.111/L       12.401/C         Indexes       23.3111/L       12.401/C       12.401/C         WILLIAMANDON, JOSEPH M       12.911/L       12.401/C       12.401/C         23.3111/L       12.	lip						
HEINNEL, H L         283 W. PARK AVE.         SUITE 201         WINTER PARK FL         Ball         Ball         Ball         Present to the provisions of Sectors 607 0002 and 607 1508. Florida Statuers the above-name corporation subcrit hits statement for the purpose of changing its registered agent. and familia with and sched to Florida. Such change was authorized by the corporation's board of directors. Thereby accept the abgointment as fagilistered agent. and familia with and sched to Florida. Such change was authorized by the corporation's board of directors. Thereby accept the abgointment as fagilistered agent. and familia with and sched to Florida. Such change was authorized by the corporation's board of directors. Thereby accept the abgointment as fagilistered agent. and familia with and sched for florida. Such change was authorized by the corporation's board of directors. Thereby accept the abgointment as fagilistered agent. and family with and sched florida. Such change was authorized by the corporation's board of directors. Thereby accept the abgointment as fagilistered agent. and family with and sched florida. Such change was authorized by the corporation's board of directors. Thereby accept the abgointment as fagilistered agent. and family directors and the instate of the addition directors in 12.         Dot (CERS AND DIRE CTORS       13.         WILLIAMSON, JOSEPH M       11 ITLE         283 0 N. ORANGE BLOSSOM TRAIL       12 Bitter Address         45 CP       11 ITLE         NERO, WILLIAM       23 Sinter Address         25 ZP       11 ITLE         N DRANG							
WINTER PARK FL       Bit     City     K SL: MAR.ex     FL     Bit     Stip Code       Pursuant to the provisions of Sections 637 05:02 and 607.1508, Florida Statutes, the above-named corporation shortd of the purpose of changing its registered agent, or both, in the State of Tipfde. Stoth change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Tipfde. Stoth change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or board, and the stopped at the					IlliAm NERO		
WINTER PARK FL       Bit     City     Kitsing and constants       Bit     City     Kitsing and constants     Bit     Zip Code       Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation based of functions. International state sequence of change was authorized by the corporations based of functions. International state sequence of change of change was authorized by the corporations based of functions. International state sequence of change was authorized by the corporation based of functions. International state sequence of change of change was authorized by the corporation based of functions. International state sequence of the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the categorial statement of the provisions of Section Scale and the international statement of the appointment as regulatered agont, or both, and by corp the categorial statement of the provisions of Section Scale and the international statement of the provision of sections corporation is based of the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by the corporation is a corporation of appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp the appointment as regulatered agont, or both, and by corp				82 Street Ad	Idress (P.O. Box Number is Not Acceptat	"Roslow"	K.
Presume to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above mended corporation submits this statement for the purpose of changing is registered agent, or handling with, and glorady of directors. Thereby accept the appointment as registered agent, and main with, and glorady of organized agent and the factores. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are directors. Thereby accept the appointment as registered agent, and there are an advect agent and and a set at the area and th				83			
Determine to the processes of Sectors 607 602 and 607 5008. Florids Elabore, named accounts should be the statement for the purpose of changing its egistered agent or both in the State of Tipdes. Sector 607 6508. Florids Statutes.       Name of the purpose of changing its egistered agent or both in the State of Tipdes. Sector 607 6508. Florids Statutes.         NATURE       Will MAN.       Nector purpose of changing its egistered agent or both in the State of Tipdes. Sector 607 6508. Florids Statutes.       Name of the purpose of changing its egistered agent or both is board of directors. Interest accept the appointment as registered agent or both in the State agent and the adjustment is a state of a state agent of the changing its egistered agent of the purpose of changing its egistered agent or board of directors.         NATURE       CHE REAND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         OFFICE RIS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         If a gas the transfer agent or the purpose of changing agent is a street appoint. I and the adjustment and the adjustment and the adjustment and the adjustment agent or adjustment agent adjustment agent or adjustment agent or ad				05			
NATURE     WWW     WWW     WWW       Signature: have of printed random of any datable     (MOLE Regulated Agent Signature the adapting)     DATE       OFFICERS AND DIRECTORS     13     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       E     DST     DELETE     11 Initic       E     WILLIAMSON, JOSEPH M     12 MAKE       2830 N. ORANGE BLOSSOM TRAIL     13 STREET ADDRESS       .str.2p     Change     Addition       E     DP     DELETE     21 Initic       E     ORANGE BLOSSOM TRAIL     13 STREET ADDRESS       .str.2p     XISSIMMEE FL     14 CITY-SI-ZP       E     DP     DELETE     21 Initic       Signature have blossom trail     23 STREET ADDRESS     23 STREET ADDRESS       .str.2p     XISSIMMEE FL     24 OTT-SI-ZP       E     DELETE     31 TITLE       E     DELETE				84 City	1	85 Zip C	ode
Signature: by red or private arow of deputient deputient of the fragments     (NOTE Registing Agent deputient deputient of the fragments     (NOTE Registing Agent deputient deputients     DATE       OFF ICE RS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       OFF ICE RS AND DIRECTORS     DELETE     11 ITLE     Change     Addition       E     WILLIAMSON, JOSEPH M     12 NAME     13 STREET ADDRESS       2830 N. ORANGE BLOSSOM TRAIL     13 STREET ADDRESS       -str.2p     KISSIMMEE FL     0 Change     Addition       E     DP     DELETE     21 NTLE     0 Change     Addition       et nooress     2830 N. ORANGE BLOSSOM TRAIL     23 STREET ADDRESS	Pursuant		7.0502 and 607.1508, Florida Sta	84 City K.	rearction submits this statement for the r	FL 34	<b>7 44-</b>
OFFICE RS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       E     DST     IDELETE     11 TITLE     IDELETE     IDELETE     Addition       E     WILLIAMSON, JOSEPH M     12 MAME     12 MAME     IDELETE	Pursuant to office or n agent. I a		7.0502 and 607.1508, Florida Sta State of Fighda, Such change wa obligations of, Section 607.0505,	84 City K.	proration submits this statement for the pration's board of directors. I hereby accept	FL 34	<b>7 44</b> -
E       WILLIAMSON, JOSEPH M       12 MAME         ET ADDRESS       2830 N. ORANGE BLOSSOM TRAIL       13 STREET ADDRESS         -ST-2IP       DP       DELETE       1.4 DTV-ST-ZIP         E       DP       DELETE       2.1 TITLE         E       NERO, WILLIAM       283 DR. ORANGE BLOSSOM TRAIL       2.3 STREET ADDRESS         -str-ZIP       KISSIMMEE FL       2.4 CITV-ST-ZIP         E       NERO, WILLIAM       2.3 STREET ADDRESS         -str-ZIP       KISSIMMEE FL       2.4 CITV-ST-ZIP         ET ADDRESS       3.3 STREET ADDRESS         -str-ZIP       DELETE       3.1 TILE         ET ADDRESS       3.3 STREET ADDRESS         -str-ZIP       DELETE       3.1 TILE         ET ADDRESS       3.3 STREET ADDRESS         -str-ZIP       DELETE       3.1 TILE         -str-ZIP       DELETE       3.1 TILE         -str-ZIP       DELETE       3.1 TILE         -str-ZIP       DELETE       3.1 TILE         -str-ZIP       DELETE       4.1 TILE         -str-ZIP       -str-ZIP       -str-ZIP         -str-ZIP       -str-ZIP       -str-ZIP         -str-ZIP       -str-ZIP       -str-ZIP         -str-Z	office or re agent. I a	to the provisions of Sections 607 registered agent, or both, in the mfamiliar with, and accept the of MMMMM	State of Florida. Such change wa obligations of, Section 607.0505,	utes, the above-named co sauthorized by the corpor Florida Statutes.	Propration submits this statement for the pration's board of directors. I hereby accept U-73-58	FL 34 purpose of changing its pt the appointment as n	<b>7 44-</b>
ET ADDRESS 2830 N. ORANGE BLOSSOM TRAIL 13 STREET ADDRESS ST-ZIP C DP C DP C DELETE 21 TILE 22 NMAE ET ADDRESS ST-ZIP C C Change Addition Change Addition Change Addition Change Addition Change Addition E Change C Change Addition Change Addition E Change C Change Addition Change Addition E Change Addition E Change Addition E Change Addition Change Addition E Change Addit	office or n agent. I a NATURE	to the provisions of Sections 607 egistered agent, or both, in the mfamiliar with, and accopt the Manual Signature, typed or printed name of register OFFICERS	State of Fighda. Such change wa obligations of, Section 607.0505, et agent and title if applicable (N S AND DIRECTORS	84     City       utes, the above-named co       sauthorized by the corpor       Florida Statutes.       W11)       Am       V12       Agent signature rec       13.	propriation submits this statement for the pration's board of directors. I hereby accept	DATE DATE	s registered egistered
ST-ZIP       KISSIMMEE FL       14.CITY-ST-ZIP         DP       DELETE       21.TILE         2830 N. ORANGE BLOSSOM TRAIL       23.STREELADDRESS         ST-ZIP       KISSIMMEE FL       24.0ITY-ST-ZIP         KISSIMMEE FL       DELETE       31.TILE         24.0ITY-ST-ZIP       OELETE       31.TILE         ST-ZIP       DELETE       31.TILE         ST-ZIP	office or n agent. I a NATURE	to the provisions of Sections 607 egistered agent, or both, in the mfamiliar with, and accept the Multiple Signature, typed or printed name of register OFFICERS	State of Fighta. Such change wa obligations of Section 607.0505, ed agent and the if applicable (h S AND DIRECTORS	84     City       utes, the above-named costs     sauthorized by the corpor       Florida Statutes.     Millian ME.P.       Millian ME.P.     Millian ME.P.       OTE Registered Agent signature reconstruction     13.       1.1 ITILE     1.1 ITILE	propriation submits this statement for the pration's board of directors. I hereby accept	DATE DATE	s registered egistered
e     NERO, WILLIAM     22 NAME       2830 N. ORANGE BLOSSOM TRAIL     2 strict ADDRESS       strict     3 strict ADDRESS       strict     4 city-strict       ctable     2 NAME       strict     3 strict ADDRESS       strict     3 strict ADDRESS       strict     4 city-strict       ctable     4 city-strict       strict     Change       Addition       strict     4 city-strict       strict     Change       addition       strict     2 NAME       strict     3 strict ADDRESS       strict     5 strict ADDRESS       strict     5 strict ADDRESS       strict ADDRESS     6 strict ADDRESS <td>NATURE</td> <td>to the provisions of Sections 607 egistered agent, or both, in the mfamiliar with, and accept the Signeture, by ed or printed name of register OFFICERS DST WILLIAMSON, JOSEPH M</td> <td>State of Fighta. Such change wa obligations of Section 607.0505, estagent and the stapplicable (h S AND DIRECTORS</td> <td>84     City       utes, the above-named coss authorized by the corpor       Florida Statutes.       W11)/Am     N &amp; D       OTE     Registered Agent signature red       13.       1.1 TifLE       1.2 NAME</td> <td>propriation submits this statement for the pration's board of directors. I hereby accept</td> <td>DATE DATE</td> <td>s registered egistered</td>	NATURE	to the provisions of Sections 607 egistered agent, or both, in the mfamiliar with, and accept the Signeture, by ed or printed name of register OFFICERS DST WILLIAMSON, JOSEPH M	State of Fighta. Such change wa obligations of Section 607.0505, estagent and the stapplicable (h S AND DIRECTORS	84     City       utes, the above-named coss authorized by the corpor       Florida Statutes.       W11)/Am     N & D       OTE     Registered Agent signature red       13.       1.1 TifLE       1.2 NAME	propriation submits this statement for the pration's board of directors. I hereby accept	DATE DATE	s registered egistered
ET ADDRESS       2830 N. ORANGE BLOSSOM TRAIL       2.3 STREEL ADDRESS         IST-ZIP       IDELETE       3.1 TILE         IE       IDELETE       3.1 TILE         ST-ZIP       IDELETE       3.1 TILE         IDELETE       3.1 TILE       IDELETE         3.1 STREET ADDRESS       3.3 STREET ADDRESS         ST-ZIP       IDELETE       3.1 TILE         IDELETE       3.1 TILE       IDELETE         ST-ZIP       IDELETE       3.1 TILE         IDELETE       3.1 TILE       IDELETE         ST-ZIP       IDELETE       3.1 TILE         IDELETE       3.1 TILE       IDELETE         ST-ZIP       IDELETE       4.1 TILE         IDELETE       4.1 TILE       IDELETE         ST-ZIP       IDELETE       4.1 TILE         IDELETE       5.1 TILE       IDELETE         ST-ZIP       IDELETE       5.1 TILE         IDELETE       5.1 TILE       IDELETE         ST-ZIP       IDELETE       5.1 TILE         IDELETE       5.1 TILE       IDELETE         ST-ZIP       IDELETE       5.1 TILE         IDELETE       5.1 TILE       IDELETE         ST-ZIP       IDELETE	office or n agent. I a NATURE	to the provisions of Sections 607 egistered agent, or bolt, in the m familiar with, and accept the Storeture, build or protect name of register OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL	State of Fighta. Such change wa obligations of, Section 607.0505, ed agent and late if applicable (K S AND DIRECTORS DELETE SOM TRAIL	84     City       utes, the above-named cost southorized by the corpor       Florida Statutes.       Will/Amage: Agent signature reconstruction       13.       1.1 TillE       1.2 NAME       1.3 STHEET ADDRESS       1.4 CITY-ST-ZIP	propriation submits this statement for the pration's board of directors. I hereby accept	DATE CERS AND DIRECTORS	S IN 12
LST-ZIP       KISSIMMEE FL       2.4 CitY-S1-ZiP         IDELETE       3.1 TILE       IDELETE         3.2 NAME       3.3 STRIET ADDRESS         ST-ZIP       IDELETE         IDELETE       3.1 TILE         IDELETE       4.1 TILE         IDELETE       4.1 TILE         IDELETE       4.1 TILE         IDELETE       4.2 NAME         IDELETE       4.2 NAME         IDELETE       5.1 TILE         IDELETE       5.1 TILE         IDELETE       5.1 TILE         IDELETE       5.3 STREET ADDRESS         IDELETE       5.3 STREET ADDRESS         IDELETE       5.3 STREET ADDRESS         IDELETE       5.1 TITLE         IDELETE       6.1 TITLE         IDELETE       6.1 TITLE         IDELETE       6.1 TITLE         IDELETE       6.3 STREET ADDRESS	office or n agent. I at NATURE	to the provisions of Sections 607 egistered agent, or both, in the m familiar with, and govern the of signature, by ed or printed name of register OF FICE RS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP	State of Fighta. Such change wa obligations of, Section 607.0505, ed agent and late if applicable (K S AND DIRECTORS DELETE SOM TRAIL	84     City       utes, the above-named corpor       Florida Statutes.       Will)     NS.P.       OTE Registered Agent signature rec       13.       1.1 TIFLE       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TIFLE	propriation submits this statement for the pration's board of directors. I hereby accept	DATE CERS AND DIRECTORS	S IN 12
S1 ADDRESS       32 NAME         S1 ADDRESS       33 STREET ADDRESS         S1 - ZIP	office or r agent. I a NATURE	to the provisions of Sections 607 egistered agent, or both, in the m familiar with, and accept the of Signature, by ed or printed name of register OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM	State of Fighta. Such change was obligation of Section 607.0505, ed agent end the if applicable (N S AND DIRECTORS DELETE COM TRAIL	84     City       utes, the above-named correlation       sauthorized by the corpor       Florida Statutes.       NJ)/A     NS.P       OIE Registered Agent signature rec       13.       1.1 TifLE       1.2 NAME       1.3 STREET ADDRESS       1.4 City-St-ZiP       2.1 TifLE       2.2 NAME	propriation submits this statement for the pration's board of directors. I hereby accept	DATE CERS AND DIRECTORS	S IN 12
ET ADDRESS       33 STREET ADDRESS         .str-zip       34. CitY-St-ZiP         DELETE       4.1 Title         .et ADDRESS       4.2 NAME         .str-zip       4.3 STREET ADDRESS         .str-zip       4.2 NAME         .str-zip       4.1 Title         .str-zip       1.1 Title         .str-zip       4.2 NAME         .str-zip       4.2 NAME         .str-zip       1.1 Title         .str-zip       <	office or n agent. I a NATURE ET ADDRESS ST-ZIP ET ADDRESS	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and the it applicable (N S AND DIRECTORS DELETE COM TRAIL DELETE	84     City       utes, the above-named corpor       southorized by the corpor       Florida Statutes.       NJ)     NS       NS     NS       OTE Registered Agent signature rec       13.       1.1 TifLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TifLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP	propriation submits this statement for the pration's board of directors. I hereby accept	FL 342	s registered egistered S IN 12 Addition
ST-ZIP       34. CITY - ST-ZIP         DELETE       4.1 TITLE         4.2 NAME         4.2 NAME         4.3 STREET ADDRESS         ST-ZIP         DELETE         DELETE         DELETE         ST-ZIP         DELETE         DELETE         DELETE         DELETE         DELETE         ST-ZIP         DELETE         DELETE         ST-ZIP         DELETE         G.3 STREET ADDRESS         ST-ZIP         DELETE         G.3 STREET ADDRESS         ST-ZIP         Change         Addition         ST-ZIP         ST-ZIP         ST-ZIP         ST-ZIP <tr< td=""><td>office or r agent. I a NATURE ET ADDRESS :ST-2IP ET ADDRESS :ST-2IP</td><td>to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS</td><td>State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and the it applicable (N S AND DIRECTORS DELETE COM TRAIL DELETE</td><td>84     City       utes, the above-named corpor       suthorized by the corpor       Florida Statutes.       NJ))AN     NS.P.       OTE Registered Agent signature rec       13.       1.1 TifLe       1.2 NAME       1.3 STHEET ADDRESS       1.4 CITY-ST-ZIP       2.1 TifLe       2.9 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TILE</td><td>propriation submits this statement for the pration's board of directors. I hereby accept</td><td>FL 342</td><td>s registered egistered S IN 12 Addition</td></tr<>	office or r agent. I a NATURE ET ADDRESS :ST-2IP ET ADDRESS :ST-2IP	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and the it applicable (N S AND DIRECTORS DELETE COM TRAIL DELETE	84     City       utes, the above-named corpor       suthorized by the corpor       Florida Statutes.       NJ))AN     NS.P.       OTE Registered Agent signature rec       13.       1.1 TifLe       1.2 NAME       1.3 STHEET ADDRESS       1.4 CITY-ST-ZIP       2.1 TifLe       2.9 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TILE	propriation submits this statement for the pration's board of directors. I hereby accept	FL 342	s registered egistered S IN 12 Addition
ET ADDRESS 4 2 NAME 4 2 NAME 4 2 NAME 4 3 STREET ADDRESS ST-ZIP DELETE 5.1 TITLE Change Addition 5 2 NAME 5 3 STREET ADDRESS ST-ZIP DELETE 6.1 TITLE Change Addition 5 4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition 6 2 NAME 6 3 STREET ADDRESS	office or r agent. I a NATURE ET ADDRESS :ST-ZIP : :ST-ZIP	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and the it applicable (N S AND DIRECTORS DELETE COM TRAIL DELETE	84     City       utes, the above-named corpor       sauthorized by the corpor       Florida Statutes.       W1))/AN     NE.0       OTE Registered Agent signature rec       13.       1.1 TifLe       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TifLE       2.3 STREET ADDRESS       2.4 City-ST-ZIP       3.1 TifLE       3.2 NAME	propriation submits this statement for the pration's board of directors. I hereby accept	FL 342	s registered egistered S IN 12 Addition
ET ADDRESS       43 STREET ADDRESS         IST-ZIP       44 CiTY-ST-ZiP         DELETE       51 TITLE         DELETE       52 NAME         ST-ZIP       54 CiTY-ST-ZiP         IDELETE       54 CiTY-ST-ZiP         DELETE       61 TITLE         IDELETE       61 TITLE         IDELETE       63 STREET ADDRESS	office or r agent. I a NATURE ET ADDRESS ST-ZIP ET ADDRESS ET ADDRESS	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and the it applicable (N S AND DIRECTORS DELETE COM TRAIL DELETE	84       City         utes, the above-named co         sauthorized by the corpor         Florida Statutes.         W1))       Ame         13.         1.1 TifLe         1.2 NAME         1.3 STREET ADDRESS         1.4 City-ST-ZiP         2.1 TifLe         2.2 NAME         2.3 STREET ADDRESS         2.4 City-ST-ZiP         3.1 TifLe         3.2 STREET ADDRESS         2.4 City-ST-ZiP         3.1 TifLe         3.2 STREET ADDRESS         3.3 STREET ADDRESS	propriation submits this statement for the pration's board of directors. I hereby accept	FL 34	s registered egistered S IN 12 Addition
ST-ZIP     44 CiTY-ST-ZIP       DELETE     51 TiTLE       DELETE     51 TiTLE       S3 STREET ADDRESS       ST-ZIP       DELETE       DELETE       DELETE       S4 CiTY-S1-ZIP       DELETE       61 TIFLE       62 NAME       63 STREET ADDRESS	office or r agent. I a NATURE ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and title if applicable (fr S AND DIRECTORS DELETE SOM TRAIL DELETE DELETE DELETE	84     City       utes, the above-named co       suthorized by the corpor       Florida Statutes.       W11)       Ame       13.       1.1 TIFLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TIFLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIFLE       3.2 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIFLE       3.2 STREET ADDRESS       3.4 CITY-ST-ZIP       3.1 TIFLE       3.2 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TIFLE	propriation submits this statement for the pration's board of directors. I hereby accept	FL 34	s registered egistered S IN 12 Addition
DELETE       5.1 TITLE       Change       Addition         52 NAME       5.3 STREET ADDRESS       S.3 STREET ADDRESS         ST-ZIP       DELETE       6.1 TITLE       Change       Addition         DELETE       6.1 TITLE       Change       Addition         ET ADDRESS       6.3 STREET ADDRESS       6.3 STREET ADDRESS	office or r agent. I a NATURE TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and title if applicable (fr S AND DIRECTORS DELETE SOM TRAIL DELETE DELETE DELETE	84     City       utes, the above-named co       sauthorized by the corpor       Florida Statutes.       Will)       Ame       13.       1.1 TIFLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TIFLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIFLE       3.2 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIFLE       3.2 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIFLE       3.2 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TIFLE       4.2 NAME	propriation submits this statement for the pration's board of directors. I hereby accept	FL 34	s registered egistered S IN 12 Addition
T ADDRESS     5.3 STREET ADDRESS       ST-ZIP     5.4 CITY-ST-ZIP       DELETE     6.1 THLE       Change     Addition       6.2 NAME       6.3 STREET ADDRESS	office or r agont. 1 a NATURE T ADDRESS <u>ST-ZIP</u> T ADDRESS <u>ST-ZIP</u> T ADDRESS <u>ST-ZIP</u>	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and title if applicable (fr S AND DIRECTORS DELETE SOM TRAIL DELETE DELETE DELETE	84     City       Utes, the above-named co       sauthorized by the corpor       Florida Statutes.       Will)       Am       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS	propriation submits this statement for the pration's board of directors. I hereby accept	FL       34.2         purpose of changing its pl the appointment as more structure.       34.2         DATE       2         CERS AND DIRECTORS       1         Change       1         Change       1         Change       1         Change       1         Change       1         Change       1	s registered egistered S IN 12 Addition
ST-ZIP     5.4 CITY-ST-ZIP       DELETE     6.1 TITLE       Change     Addition       6.2 NAME       6.3 STREE1 ADDRESS	office or r agent. 1 a NATURE T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change was obligations of, Section 607.0505, et agent and the diagoleable (N S AND DIRECTORS DELETE SOM TRAIL DELETE DELETE DELETE	84     City       Utes, the above-named co       sauthorized by the corpor       Florida Statutes.       W.1)     Am       Max     Max       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP	propriation submits this statement for the pration's board of directors. I hereby accept	FL       34.2         purpose of changing its pl the appointment as more structure.       34.2         DATE       2         CERS AND DIRECTORS       1         Change       1         Change       1         Change       1         Change       1         Change       1         Change       1	s registered egistered S IN 12 Addition
DELETE 6.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS	office or r agent. 1 a NATURE T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change was obligations of, Section 607.0505, et agent and the diagoleable (N S AND DIRECTORS DELETE SOM TRAIL DELETE DELETE DELETE	84     City       Utes, the above-named corpor       Sauthorized by the corpor       Florida Statutes.       W.1)     Ame       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 DITY-ST-ZIP       5.1 TITLE       5.2 NAME	propriation submits this statement for the pration's board of directors. I hereby accept	FL       34.2         purpose of changing its pl the appointment as more structure.       34.2         DATE       2         CERS AND DIRECTORS       1         Change       1         Change       1         Change       1         Change       1         Change       1         Change       1	s registered egistered S IN 12 Addition
6.3 STREET ADDRESS	office or r agent. 1 a NATURE ET ADDRESS (ST-ZIP ET ADDRESS (ST-ZIP) ET ADDRESS (ST-ZIP) ET ADDRESS (ST-ZIP) ET ADDRESS (ST-ZIP) ET ADDRESS	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change was obligations of, Section 607.0505, et agent and the diagoleable (N S AND DIRECTORS DELETE SOM TRAIL DELETE DELETE DELETE	84     City       Utes, the above-named corpor       sauthorized by the corpor       Florida Statutes.       W1))/AM     // Sc. R.       OTE Registered Agent signature rec       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       3.4 CITY-ST-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       3.4 CITY-ST-ZIP	propriation submits this statement for the pration's board of directors. I hereby accept	FL       34.2         purpose of changing its pl the appointment as more structure.       34.2         DATE       2         CERS AND DIRECTORS       1         Change       1         Change       1         Change       1         Change       1         Change       1         Change       1	s registered egistered S IN 12 Addition
	office or r agent. 1 a NATURE ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and the it applicable (N S AND DIRECTORS DELETE COM TRAIL DELETE DELETE DELETE DELETE DELETE	84     City       Utes, the above-named corpor       Sauthorized by the corpor       Florida Statutes.       With Data Statutes.       1.1 Title       1.2 NAME       1.3 STREET ADDRESS       1.4 City-ST-ZiP       2.1 Title       2.2 NAME       2.3 STREET ADDRESS       3.4 City-ST-ZiP       3.1 Title       3.2 NAME       3.3 STREET ADDRESS       3.4 City-ST-ZiP       4.1 Title       4.2 NAME       4.3 STREET ADDRESS       4.4 City-SI-ZiP       5.1 Title       5.2 NAME       5.3 STREET ADDRESS       5.4 City-SI-ZiP	propriation submits this statement for the pration's board of directors. I hereby accept	FL       34.3         burpose of changing its purpose of changing its purpose of changing its purpose.       34.4         DATE       Change         DATE       Change         Change       Change         Change       Change         Change       Change	registered     egistered     sitered     SiN 12     Addition     Addition     Addition     Addition     Addition
	office or r agent. 1 a NATURE ET ADDRESS (ST-2IP ET ADDRESS (ST-2IP ET ADDRESS (ST-2IP ET ADDRESS (ST-2IP) ET ADDRESS (ST-2IP) ET ADDRESS (ST-2IP) ET ADDRESS	to the provisions of Sections 607 egistered agent, or both, in the 3 signature, by ed or printed name of repetion OFFICERS DST WILLIAMSON, JOSEPH M 2830 N. ORANGE BLOSS KISSIMMEE FL DP NERO, WILLIAM 2830 N. ORANGE BLOSS	State of Fighta. Such change wa obligation of, Section 607.0505, ed agent and the it applicable (N S AND DIRECTORS DELETE COM TRAIL DELETE DELETE DELETE DELETE DELETE	84     City       utes, the above-named corpor       Florida Statutes.       W1))AN     NEED       OTE Registered Agent signature rec       13.       1.1 TITLE       1.2 NAME       1.3 STHEET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CITY-ST-ZIP       6.1 TITLE       6.2 NAME	propriation submits this statement for the pration's board of directors. I hereby accept	FL       34.3         burpose of changing its purpose of changing its purpose of changing its purpose.       34.4         DATE       Change         DATE       Change         Change       Change         Change       Change         Change       Change	registered     egistered     sitered     SiN 12     Addition     Addition     Addition     Addition     Addition

いったい かいしん かいしん かいかい 御書 かいたい いたい かいしん しゅうしん

Ş.

- 1993年代,199

•