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

Maring Address
681 IOWA WOODS CIR E

ORLANDO FL 32824-8633

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

661 IOWA WOODS CIR E

SIGNATURE:

ORLANDO FL 32824



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000020890 (8)

FRANCK ENTERPRISES OF ORLANDO, INC.

03/15/1993 04/30/1996 2. Principal Plane of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 59-3176143 21 26 Suite, Apt. #, etc \$8.75 Additional Suite, Apt. #. cte 5. Certificate of Status Desired Fee Required 27 22 Oily & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Ζip Country 8. This corporation has liability for intangible tax under s. 199.032. Yes No 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WAKEFIELD, S. CRAIG 920 W EMMETT ST 82 Street Address (P.O. Box Number is Not Acceptable) KISSIMMEE FL 34741 83 Crty 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 1 and accept the obligations of, Section 607 0505, Florida Statutes. Expectage types or powhereness in the other earlighest and the it applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6)DELETE ☐ Change Addition PD 1.11006 THE FRANCK, ROBIN L 12 NAME 661 IOWA WOODS CIR E 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32824 1 4 CITY - ST - ZIP COLY ST. 705 DULETE 2 1 TITLE ☐ Change Addition $\mathrm{HL}\hat{\epsilon}$ VSTD FRANCK, DONALD E 2.2 NAME HAMI 661 IOWA WOODS CIR E STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32824 2 4 CITY - ST- ZIP (317-51-20 DELETE Change LoitibbA HILE 3 T THEF NAM 3.2 NAME STREET ADDRESS 33 STREET ADDRESS 3.4. CITY - ST-ZIP 01*Y+51-70* DELETE Change Addition 41 TITLE THE 4. 2 NAME NASS 4.3 STREET ADDRESS SINCE ASSIST 4 4 CITY-SI-ZIP COTY Str-709 DELETE Change Addition TIPLE 51 TITLE 52 NAME 5.3 STREET ADDRESS STREET A TORESS 5.4 CITY - ST- ZIP OHY-51 26 DELETE Addition 6 1 TITLE Change THE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY ST 761 64 CITY - ST - 7IP 14. It do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an off per or director of the coordination on or the recopier or trusted empowered to execute this report as required by Chapter 907, Florida Statutes, and that my name appears in Block 12 or Block

FILED Mar 20 1997 8:00am Secretary of State



3a. Date of Last Report

0094462

3. Date Incorporated or Qualified