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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 13 1998 8:00am Secretary of State

	MENT # P9300(CORPORATION	002	2298 (2)				
Principal Plac	e of Business	M:	uling Address			- I ISOTUBBI THE IDIOR CHILL BRITI BRITI OTHIL BOLLE HOLL		
1902 ALDEN ROAD 1902 ALDEN ROAD								
ORLANDO FL 32803 ORLANDO FL 32803								
						DO NOT WRITE IN THIS S	PACE	
						3. Date Incorporated or Qualified		
2. Principal P	lace of Business	28	Mailing Address			03/22/1993 4. FEI Number		
21	21		26 P.O. BOX 547695			59-3171834		pplied For ot Applicable
Suite, Apt. #, etc.		1551	Suite, Apt. #, etc.					Additional
22		27	ORLANDO			5. Certificate of Status Desired	+	equired
City & State			City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	FL			Trust Fund Contribution		to Fees
Zip	Country	-	32854	Country	EA	8. This corporation owes or has paid the curr	_ ^ _	
24	25 25 Name and Address of Currer	29		30	~1	Personal Property Tax due June 30. 10. Name and Address of New Registered A		_] No
PA	RLING, MICHAEL R	it nogra	tered Agent	81	Name	10. Name and Address of New Registered A	råeur	
	NLING, MICHAEL N 12 ALDEN ROAD					745		
	LANDO FL 32803			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
011	D41D0 1 E 32003			63	<u> </u>			
				<u>L</u>				
				84	City	FL	85 Zip	Code
SIGNATURE	egistered agent, or both, in the State in tamiliar with, and acceptate oblig- Signature spiral or printed carrier of representation. OF FICERS AN	ed a el Pir	if applicable (N			poration submits this statement for the purpose of ation's board of directors. I hereby accept the appoint of the purpose of t	\$	
TITLE	D		DELETE	1.1 TITLE	T	ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
NAME	BORLING, MICHAEL R			1.2 NAME				
STREET ADDRESS	50 INTERLAKEN ROAD			1.3 STREET	r address			
CITY-ST-ZIP	ORLANDO FL 32804			1.4 CITY - 5	ST-ZIP			
TITLE	D		DELETE	2.1 TITLE			☐ Change	Addition
NAME	MILLIGAN, GEORGE H			2.2 NAME				
STREET ADDRESS	23 INTERLAKEN ROAD			2.3 STREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32804	Dr. cre		2.4 CITY -	ST-ZIP			
TITLE			DELETE	3 1 TITLE			L Change	☐ Addition
NAME				3 2 NAME				
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-1	SI-ZIP		☐ Change	Addition
NAME			EJ ORCCE	4.1 INCE		•	Change	Auonion
STREET ADDRESS				4.2 NAME	ADDRESS			ĺ
CITY-ST-ZIP				4.4 CITY-S	1			
TITLE		DELETE		5.1 TITLE	/1 £H		Change	Addition
NAME			5.2 NAME	-				
STREET ADDRESS				5 3 STREET	ADDRESS			
CITY+S1-ZIP				5 4 CITY-S				
TITLE		DELETE		6 1 TITLE			Change	Addition
NAME				6.2 NAME				
STREET ADDRESS				6 3 STREET	ADDRESS			
CITY-ST-ZIP				6 4 CITY - S	IT-ZIP			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 turstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attue binient with an address.