## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000027861 (2)

**DOCUMENT #** 1. Corporation Name

** * * *	& L ENTERPRISES OF ORLA	NDO, II	IC.								
Principal Place of Business Mailing Address											
STE. 2		7101 PRESIDENT'S <b>D</b> RIVE STE. 265 ORLANDO FL		Æ							
ORLAN	(DO FL					3. Date Incorporated or Qualified 04/14/1993	3a. Date	of Last F 05/01/1			
2. Princip	oal Place of Business	2a. 26	a. Mailing Address				FO 0474500			Applied For Not Applicable	
	Apt. #, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City &	State	28	City & State			6. Election Campaign Financing Trust Fund Contribution		,	00 May Be ed to Fees		
Ζiρ 24	Country 25	29	Zip Country				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No				
9. Name and Address of Current Registered Agent							10. Name and Address of New R	egistered .	Agent		
GARTEN, JOHN D 7101 PRESIDENT'S DRIVE					81 82		ame treet Address (P.O. Box Number is Not Acceptable)				
STE. 265 Orlando fl			·		83						
					84	City	FL 85 Zip Code				
1 or re	uant to the provisions of Sections 607.06 gistered agent, or both, in the State of Fl ar with, and accept the obligations of, Se	orida Suct	n chance was authorized	the abo by the c	ve-r	named corpora oration's board	ation submits this statement for the pur of of directors. I hereby accept the appo	pose of cha pintment as	inging its registere	registered office id agent. I am	

Signature, typed or printed namic of registered agent and title it applicable (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1. 1 TITLE TILLE GARTEN, JOHN D 1.2 NAME 1631 WIND WILLOW ROAD 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32809 14 CITY-\$1-7/2 C(TY - ST - ZIP Change Addition DELETE 2 11IILE TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - \$1 - ZIP C-TY-ST-ZIP ☐ Change ■ Addition DELETÉ 3. 1 TITLE TITLE 3.2 NAME NAM: 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - \$1 - 2(P CITY-ST-ZIP ☐ Change Addition DELETE 4, 1 1/11/16 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CrTY - ST - ZIP CHY-ST-ZIP ☐ Change Addition DELETE 5 1 TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TITLE TITLE 5.2 NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP C(TY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 jetta aged, or on an attachment with an address.

JOHN D. GARTEN

**CR2E034**