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

Mailing Address

**SUITE 2300** 

200 SOUTH ORANGE AVENUE

ORLANDO FL 32801-3432

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

10101 GENERAL DR

ORLANDO FL 32824



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000037298 (5)

ALL STAGING UNLIMITED, INC.

<u>05/21/1993 </u> 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 26 59-3190036 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name A.G.C. CO. 200 S. ORANGE AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 2300** 83 ORLANDO FL 32801-3432 84 City 85 Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE Change Addition TITLE 11 TITLE SMITH, JANET C NAME 1.2 NAME 2458 SHERBROOKE RD 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELLETE Change ☐ Addition TITLE 21 TITLE SMITH, DENNIS NAME 2.2 NAME 2458 SHERBROOKE RD STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELFTE Addition TITLE 4.1 TITLE NAME 4. 2 NAME

14. Thereby 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 ennual 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 ip-manged, or on an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELFTE

DELETE

SIGNATURE:

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

and I mint

2/24/98 (407) 240-8080

Change

Change

Addition

Addition

FILED

Mar 12 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified