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

FILED
Jun 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000041066 (0)**

1. Corporation Name
ORLANDO FLORAL DESIGN SCHOOL, INC.

Principal Place of Business
2310
~~2910~~ N. ORANGE AVE.
ORLANDO FL 32804

Mailing Address
2310
~~2910~~ N. ORANGE AVE.
ORLANDO FL 32804

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/10/1993

2. Principal Place of Business
21 2310 N. ORANGE AVE
Suite, Apt. #, etc.
22
City & State
23 ORLANDO, FL
Zip 24 32804 Country 25 USA

2a. Mailing Address
26 2310 N. ORANGE AVE
Suite, Apt. #, etc.
27
City & State
28 ORLANDO, FL
Zip 29 32804 Country 30 USA

4. FEI Number
59-3198998
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
ASMA, WILLIAM W
886 SOUTH DILLARD STREET
WINTER GARDEN FL 34787

10. Name and Address of New Registered Agent
81 Name CAREY L. MORELAND
82 Street Address (P.O. Box Number is Not Acceptable) 202 LOOKOUT PLACE
83 KEEWIN LEXINGTON PARK
84 City MAITLAND FL 85 Zip Code 32751

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ 06/11/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	SCHNEIDER, JEAN B		1.2 NAME		
STREET ADDRESS	2910 N. ORANGE AVE.		1.3 STREET ADDRESS	-2310 N. ORANGE	
CITY-ST-ZIP	ORLANDO FL 32804		1.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	HERZOG, RICHARD B		2.2 NAME		
STREET ADDRESS	2910 N. ORANGE AVE.		2.3 STREET ADDRESS	-2310 N. ORANGE AVE.	
CITY-ST-ZIP	ORLANDO FL 32804		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	100025641971	
STREET ADDRESS			6.3 STREET ADDRESS	-06/19/98--01017--014	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***600.00	

CR2E034 (10/97)

6/18

14. I hereby 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 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 if changed, or on an attachment with an address.

SIGNATURE: Jean B Schneider Jean B Schneider 4/28/98 4078041320