

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
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DOCUMENT # **P93000041066 (0)**

1. Corporation Name

ORLANDO FLORAL DESIGN SCHOOL, INC.



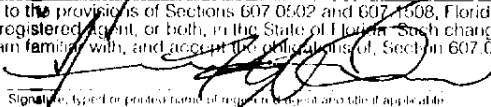
Principal Place of Business 2310 3010 N. ORANGE AVE. ORLANDO FL 32804	Mailing Address 2310 3010 N. ORANGE AVE. ORLANDO FL 32804
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2310 N. ORANGE AVE Suite, Apt. #, etc.		2a. Mailing Address 26 2310 N. ORANGE AVE Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/10/1993	
22. City & State 23 ORLANDO, FL		27. City & State 28 ORLANDO, FL		4. FEI Number 59-3198998	
24. Zip 32804		29. Zip 32804		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
25. Country USA		30. Country USA		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				7. Applied For ☐ Not Applicable	

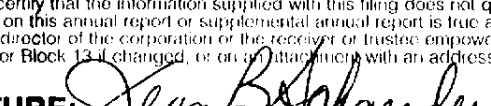
9. Name and Address of Current Registered Agent ASMA, WILLIAM N 888 SOUTH DILLARD STREET WINTER GARDEN FL 34787				10. Name and Address of New Registered Agent 81 Name CAROL L. MORELAND 82 Street Address (P.O. Box Number is Not Acceptable) 202 LOOKOUT PLACE 83 KEEWIN LEXINGTON PARK 84 City MAITLAND FL 85 Zip Code 32751			
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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  DATE **06/11/98**

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

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  DATE **11/28/98**

CR2E034 (10/97)