PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9300043374

1. Corporation Name

BECK ENTERPRISES OF ORLANDO INC.

Principal Place	e of Business	Mailing Address		{	// 8 70000 11500 1511\$ 10051 0501 1001
1510 ROYAL CIRCLE 1510 ROYAL CIRCLE				1	
APOPKA FL 32703 APOPKA FL 32703			DO NOT WEST IN TH	HE EDACE	
US US			DO NOT WRITE IN TH 3. Date Incorporated or Qualifed	IS SPACE	
3 Daineinel Di	ace of Business	2a. Mailing Address		06/14/1993 4. FEI Number	Applied For
	ace of business	26		59-3189885	Not Applicable
21 26		-		\$8.75 Additional	
22	.,	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	,	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible
24	25	29 3	0	Personal Property Tax.	Yes No
	9. Name and Address of Current	Registered Agent	81 Name D	10. Name and Address of New Registere	d Agent
			Ke	phert BECK	
BECK, ROBERT 1129 CARONE WAY			82 Street Addr	ress (BO. Box Number is Not Acceptable)	
APOPKA FL 32703			83	royal Circle	
۸ ۱			55		
			84 City 1	POPKA F	L 85 Zip Code Aようどろ
44 Diversions	to the provisions of Castiana 607.0503	and 607 1509 Florida Statutes	the above named corn	poration submits this statement for the purpose	of changing its registered
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	Signature, typed or printed name of registered agent	t and title if applicable (NOTE: Ro	egistered Agent signature require	d when reinstating) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BECK, ROBERT		1.2 NAME		
STREET ADDRESS	1510 ROYAL CIRCLE		1.3 STREET ADDRESS		ļ
C/TY-ST-ZIP	APOPKA FL		1.4 CITY-ST-ZIP	<u> </u>	
TITLE -	TS	DELETE"	2.1 TITLE		☐ Change ☐ Addition
NAME	BECK, KAREN S		2.2 NAME)
STREET ADDRESS	1510 ROYAL CIRCLE		2.3 STREET ADDRESS		
CITY-\$T-ZIP	APOPKA FL		2.4 CITY-ST-ZIP		Change C Addition
TITLE	VP	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BECK, RUSSELL		3.2 NAME		
STREET ADDRESS	5301 AEOLUS WAY		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		3.4. CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.1 TITLE		Touride Typennou
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
C/TY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TITLE		ر المحدد الم	5.2 NAME		
NAME STREET ADDRESS		,	5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP	<u> </u>	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	_		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	•	Ì
UILITOITE			_		

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, with all other like empowered.

SIGNATURE: _

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90214 018 ***150.00