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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000045017 (9)

## FILED Apr 22 1998 8:00am Secretary of State

FLORIDA DESK, INC.				
Principal Place of Business	Mailing Address			EDA DANI BANDI MEN MADI MADI
1100 W. FAIRBANKS	1100 W. FAIRBANKS			
WINTER PARK FL 32789	WINTER PARK FL 32789		DO NOT WRITE IN THI	D DDAGE
			3. Date Incorporated or Qualified	S SPACE
			06/25/1993	
2, Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3189696	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State			Fee Required
23	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	7 <sub>1</sub> p	Country	8. This corporation owes or has paid the c	
24 25	29 3	0	Personal Properly Tax due June 30.	Yes No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
Martin, robert g		81 Name		
1100 W. FAIRBANKS		82 Street Add	ress (P.O. Box Number is Not Acceptable)	***************************************
WINTER PARK FL 32789		83		
		83		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607 1508. Florida Statutes	the above-named corr	Orgation submits this statement for the purpose	of changing its registered
<ol> <li>Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation</li> </ol>	Florida Such change was aut	horized by the corporal	tion's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE	ons or, accitor oor toods, mont	ua Siaiules.		
Signature, typed or punied name of registered agent	and little if applicable (NOTE F	legistered Agent signature requi	ted when reinstaling) DAT(	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE PD	☐ DELETE	1.1 Title		Change Addition
NAME MARTIN, JEAN B		1.2 NAME		[5]
STREET ADDRESS 1100 W. FAIRBANKS CITY-ST-ZIP WINTER PARK FL		1.3 STREET ADDRESS		يًا
TITLE VSD	DELFTE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME MARTIN, ROBERT G	C 554.15	2.2 NAME		E ociande E vontros
STREET ADDRESS 1726 W. BROADWAY		2.3 STREET ADDRESS		
CITY-ST-ZIP OVIEDO FL 32765		2 4 CHY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		ĺ
STREET ADDRESS		3 3 STREET ADDRESS		
CITY-ST-ZIP		3 4. CITY - ST - ZIP		
TITLE	☐ DELET <b>e</b>	4.1 TITLE		Change Addition
NAME		4. 2 NAME		ł
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-SI-ZIP	DELETE	4.4 CITY - ST - ZIP		Observe Address
NAME	C Detele	5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS		5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP				
TITLE				
	☐ DELETE	5.4 CITY-ST-ZIP 61 TITLE		☐ Change ☐ Addition
NAME	☐ DELĒTĒ	5.4 CITY-ST-ZIP		☐ Change ☐ Addition
STREET ADDRESS	☐ DELETE	5.4 CITY-ST-ZIP 61 TITLE		☐ Change ☐ Addition

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 suppliemental 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 13 if changes or on a suppliement with an address

HATTIPE Mark & Ma

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