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 # P9300050233 (4)

A. J. SUGAR, INC.

STREET ADDRESS

Principal Plac	e of Business	Mailing Address				ille Balen Abelei Be	EM BRAID INDUCTION	AN THE AND I	
520 CENTRAL PARK DRIVE		PO BOX 953173							
SANFORD FL 32771		LAKE MARY FL 32795-3173			DO NOT WRITE IN THIS SPACE				
us		US			3. Date Incorporated or Qualified				
						07/19/1993			
2. Principal P	lace of Business	2a. Mailin	g Address			4. FEI Number		Ap	plied For
21		26	26			01-0417320		No	t Applicable
Sulte, Apt. #, etc.		Suite,	Suite, Apt. #, etc.			5. Certificate of Status Desire	d \square	\$8.75	
22		27				C. Commodito di Citatiano Decime		Fee Re	· · · · · · · · · · · · · · · · · · ·
City & State	0	—	City & State			6. Election Campaign Financi	ng 🗂	\$5.00	•
Z ip	Country	28 Zip		Cour	atro	Trust Fund Contribution		Added to	
24	25	29	ł	30	ici y	This corporation owes or h. Personal Property Tax due	•		angibie No
24	9. Name and Address of Curre			301		10. Name and Address of Ne			2 1 11
RAI	RD, J B				B1 Name	Tad B			
	E ROBINSON ST				82 Street Add	Jed <u>German</u> ress (P.Q. Box Nymber is Not Acc	entable)		
	TE 450			ľ	8	O South Kno	ώles_	Ave	
	LANDO FL 32801			Ī	83 5	uite #7			
	1				B4 City \\/\	atex Darly		85 Zip (Code
11 Pureuant	to the provisions of Section 497 056	12 and 607 150	B. Florida Stetute	s the ah	NA II	noration submits this statement for	the purpose	of changing its	s registered
office or r	to the provisions of Section 697.056 ogistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Suc	h change was a	uthorized	by the corporat	tion's board of directors. I hereby	accept the ap	pointment as	registered
	m tamiliar with, and account to only	jations of, Secut	1 1 12				1/24	Jan	
SIGNATURE	Signature, typed or printed name of registered se	ent and little if applica	PIC (NOTE	Registered	Agent signature requir	red when reinstating)	DATE	/_18	
12.	OFFICERS AN	ID DIRECTORS		13.		ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	0		DELETE	1.1 3171	Æ			Change	Addition
NAME	FEIBUS, GARY S			1.2 NA	#E				
STREET ADDRESS	301 OLD MARY COVE			1.3 \$1R	EET ADDRESS				
CITY-ST-ZIP	LAKE MARY FL		Douge		Y-ST-ZIP			T Obsesse	Addition
TITLE	D SCIONAN		☐ DELETE	2.1 TITL				☐ Change	Addition
NAME	FEIBUS, SUSAN			2.2 NAM					
STREET ADDRESS	301 OLD MARY COVE				EET ADDRESS				
CITY-ST-ZIP	LAKE MARY FL	·	DFLETE	2. 4 CIT	Y - ST - 7IP			Change	Addition
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NAME									
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			- becen	4. 2 NA					
NAME									
STREET ADDRESS					EET ADORESS				
CITY-ST-ZIP			DELETE	5.1 T(T)	r-ST-ZIP		• • •	Change	Addition
TITLE			DECEME						
NAME OTOTET ADDOLOG				5.2 NAN					
STREET ADDRESS					EE1 ADDRESS				
CITY-ST-ZIP TITLE			DELETE	6.4 CIT	r-\$1-ZIP			☐ Change	Addition
NAME				6.2 NAN					
TWO IT				A-4 110/1					,

6.3 STREET ADDRESS

14. 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 attacherent with an address.

FILED

Feb 02 1998 8:00am

Secretary of State