## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 1. Corporation Name

1996

P93000060034 (4)

Principal Place of Business Mailing Address													
7061 GRAND NATIONAL DR. SUITE 148 ORLANDO FL 32819			1716	7061 GRAND NATIONAL DR. SUITE 148 ORLANDO FL 32819									
								<ol> <li>Date Incorporated or Qualified 08/26/1993</li> </ol>	1	of Last F <b>04/24/1</b>	•		
2. Principal Place of Business				Mailing Address				4, FEI Number <b>59-3198015</b>		<del> </del>	Applied For Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required		
City & State 23				City & State				6. Election Campaign Financing Trust Fund Contribution		•	00 May Be ed to Fees		
Zip 24		Country 25	29	Ζιρ	30 Cou	intry			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No			199.032,	
	g, Name	and Address of Curre	ent Regist	tered Agent		,		1	<ol><li>Name and Address of New R</li></ol>	egistered	Agent		
						81	Name						
A.G.C. CO. 200 South Orange Ave.						82	Street A	Address	SS (P.O. Box Number is Not Acceptable)				
2300 SUN BANK CENTER						83							
ORLANDO FL 32802							City			FL	85 Z	ip Code	
or register	red agent, or	ons of Sections 607.050 both, in the State of Flo ht the obligations of, Se	rida. Such	rchange was authorize	ed by the c	orpo corpo	named cor oration's b	rporation board of	n submits this statement for the pur directors. I hereby accept the appo	pose of chi	anging its registered	registered office d agent. I am	
SIGNATURE	Signature, typed o	or printed name of registered age	m: and blie if a	applicable (NO	Te: Registered	 Agen	t signature rec	quired when	n reinstating)	DATE			
12.		OFFICERS A	ND DIREC	TORS	13.				ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	ORS IN 12	
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STREET ADDRESS		GRAND NATIONAL I	dr., sun	., Suite 148		1.3 STREET ADDRESS							
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; that I am an officer or director of the corporation or the receiver or trustee enipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFIGER OR DIRECTOR Reading 5/1/96