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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P93000063166 (1)

1. Corporatio		" 19300)0003 TO	(ו)						i
Principal Place of Business Mailing Address							I SOBALORI ELO EDIDO SUNI DONI IZANI ODIN B	Jung Bunga Musik Ka	AN DIAN DALI IN	ı II
46 NORTH WASHINGTON BLVD 46 N WASHINGTON BLVD										
SUITE 29 SUITE 29										
SARASOTA FL 34236 SARASOTA FL 34236-5928					3		DO NOT WRITE IN THIS SPACE			
US			U\$				3. Date Incorporated or Qualified 09/07/1993			
	2. Principal Place of Business			2a. Mailing Address			4. FEI Number		Applied Fo	
Suite, Apt. #, etc.			26 Suite Ant	Suite, Apt. #, etc.			58-2200567		Not Applic	
22 Suite, Apr.	#, OC.		27 Suite, Apt.				5. Certificate of Status Desired	•	75 Additiona e Required	ıal
City & Stat	City & Star	City & State			6. Election Campaign Financing	\$5	.00 May Be	9		
23			28				Trust Fund Contribution		ded to Fees	
Zip	Country		Zip	Zip Cou		1	8. This corporation owes or has paid the current year Intan		ır Intangible)
24	25 29 30			30		Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent						NI	10. Name and Address of New Regis	stered Agent		
	JLY, J E				61	Name				
46 N WASHINGTON BLVD						Street Addre	ess (P.O. Box Number is Not Acceptable)			
SUITE 29										
SARASOTA FL 34238										
					84	City		FL 85	Zip Code	
11. Pursuant	to the provis	sions of Sections 607.0	502 and 607.1508, Ft	orida Statute	s, the above	e-named corpo	oration submits this statement for the purpon's board of directors. I hereby accept the	oose of changi	ng its registr	ered
office or r	regi ste red ag ım lam iliər w	gent, or b oth, in the Sta ith, and accept the obl	ite of Florida. Such ch ligations of, Section 60	ange was at 07.0505. Flor	uthorized by rida Statutes	the corporation.	on's board of directors. I hereby accept the	he appointmer	it as register	red
SIGNATURE			•							
	Signature, types	or printed name of registered		(NOTE		nt eignature require		DATE		
12.		OFFICERS A	ND DIRECTORS	DEL EXE	13.		ADDITIONS/CHANGES TO OFFICER			
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NAME					6.2 NAME	}				}
STREET ADDRESS 6.3					6.3 STREET	ADDRESS				
CITY-ST-ZIP		•			6.4 CITY - S	r-zip				l

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 supplied ental annual apport 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 tylese 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 etlachment with an address.