## 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 #

P93000068281 (3)

E & R LOGOS COMPANY, INC.

Principal Place of Business

Mailing Address

7030 VILLA ESTELLE DR. ORLANDO FL 32619 7030 VILLA ESTELLE DR. ORLANDO FL 32819

## FILED Apr 24 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/27/1993 2. Principal Place of Busines 2a. Mailing Address 4. FEI Number Applied For 8221 59-3204827 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution Zip Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. □ No 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent eguchi. Emi j DANTAC 7030 VILLA ESTELLE DRIVE 82 ORLANDO FL 32819 OPIANDO

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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, and appointment the districtions of Section 607.0505. Florida Statutes					
$P(I_1, I_1/AQI)$					
SIGNATURE	Signature, types or printed name of registered agers and title it applicable (NOTE: F	Registered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12
TITLE	D.P. VP-S-T DELETE	1.1 TITLE		Change	Addition
NAME	CIENILSON F. DANTAS	1.2 NAME			
STREET ADDRESS	D.P. V.P.S.T DANTAS CLENILSON F. DANTAS 8221 WELLSHEPE C.P. OPLANDO FL. 32835	1.3 STREET ADDRESS			1
CITY-ST-ZIP	ORIANDO FL. 32835	1.4 CITY- \$1-ZIP			
TITLE	☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME		2.2 NAME		•	)
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP		2. 4 CITY-\$1-ZIP	<u> </u>		1
TITLE	☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			}
CITY-ST-ZIP		3.4. C(1) - ST-2 P			
TITLE	DELETE	4.1 TITLE	1	☐ Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	DELETE	5.1 TITLE		Change	Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-S1-ZIP		54 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE		☐ Change	Addition
NAME		6.2 NAME			ļ
STREET ADDRESS		6.3 STREET ADDRESS			
City.st-7iP		64 CITY- \$1 - 7IP			ľ

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

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