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

1. Corporation	MENT # P9300 ORT 100, INC.	0072195 (9))		
Principal Plac	e of Business	Mailing Address			A
4975 PINEWO	000 PL	4975 PINEWOOD PL COCOA FL 32926			
				DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified	
9 Principal F	Place of Business	2a. Mailing Address		10/11/1993 4. FEI Number Applied Fo	
21	HACE OF BUSINESS	26. Walling Address			
Sulte, Apt	#, etc.	Suite, Apt. #, etc		\$8.75 Additions	
22		27		Certificate of Status Desired Fee Required	Į,
City & Stat	te	City & State		6. Election Campaign Financing Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
	9. Name and Address of Curre			10. Name and Address of New Registered Agent	
CC	OOK, WALLACE R		81 Name		
	75 PINEWOOD PL		82 Street	t Address (P.O. Box Number is Not Acceptable)	
	COA FL 32926		52 0		
			83		
			84 City	■■ 85 Zip Code	
				FL `	
agent. I a	am familiar with, and accept the obli-	gations of, Section 607.0505, F	TE: Registered Agent signatur		∍d
12.	T	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME	D D	ניין סבונונ	1.1 TALE	Change Add	ation
STREET ADDRESS	COOK, WALLACE R 4975 PINEWOOD PL		1.2 NAME		
CITY-ST-ZIP	COCOA FL 32926		1.3 STREET ADDRESS		
TITLE	D D	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Add	dition
NAME	COOK, JUDITH A		2 2 NAME		
STREET ADDRESS	4975 PINEWOOD PL		2 3 STREET ADDRESS		
CITY-ST-ZIP	COCOA FL 32926		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	Change Add	lition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	Change Add	iition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S1 - ZIP 5.1 TITLE	Change Add	tition
NAME		t-1 specie	5.2 NAME	- Change - Change	
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Add	lition
NAME			6.2 NAME		
STREET ADDRESS	I		6.3 STREET ADDRESS	1	
CITY-ST-2IP			64 CITY-ST-7IP		

14. Thereby 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 trusted 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.

4-78-98

FILED

May 12 1998 8:00am

Secretary of State