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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P93000073179 (2)

ORTH-OS CORPORATION

Principal Place of Business 877 EXECUTIVE CENTER DR W SUITE \$03 ST PETERSBURG FL 33702		Mailing Address 877 EXECUTIVE CENTER DR W SUITE 303 ST PETERSBURG FL 33702-2474						
OT PETENDOO!		01 727211000110 12 00	WOLLTON		3. Date Incorporated or Qualified 10/15/1993	3a. Date of 10/23/1		eport
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
Sulte, Apt. #, etc.		26		 		Applicable		
22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	□ \$ {	8.75 Ad Fee Req	
City & State		City & State		Election Campaign Financing			<u></u>	
23		[28]		Trust Fund Contribution		55.00 N Added to		
Zip	Country	7ip			8. This corporation has liability for			
24	25	29	30		Florida Statutes 🔲 Yes 🖊 No			700.001
	9. Name and Address of Curre	ent Registered Agent	81		10. Name and Address of New Re	gistered Ager	it	
877 SUN	SCARA, ERNEST L EXECUTIVE CENTER DR W TE 303 PETERSBURG FL 33702		82 83	Name Street Add	Iress (P.O. Box Number is Not Acceptat	ble)	i Zip Ci	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obligation of the status of the st	gations of, Section 607.0505,	Itules, the above as authorized by Florida Statutes VOTE: Registered Age) .	poration submits this statement for the particular to the particul	purpose of chai pt the appointm	nging its nent as re	registered egistered
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIR	ECTORS	S IN 12
TITLE	DPST LEO	DELETE	1.1 THEE				Change	Addition
NAME DURRETT, LEO STREET ADDRESS 8600 15TH LANE NORTH			1.2 NAME					
STREET ADDRESS	ST PETERSBURG FL		1.3 STREFT	- 1	•			
CITY-ST-ZIP TITLE	DELETE		14 CHY- ST 2 1 THUE	1 - 7IP			Change	Addition
NAME			2.2 NAMI			۱ لــــا	a lange	□ Vacation
STREET ADDRESS			23 STREFT	ADDRESS				
CITY-ST-ZIP			2 4 CITY-S	!				
TITLE	☐ DELETE		3 1 1ITLE				Change	Addition
NAME			3 2 NAME					
STREET ADDRESS			3 3 STREE 1	ATIDRESS				
CITY-ST-ZIP		F(1) F1	3 4. CHY-S	I - ZIP				F7
TITLE		☐ DELETE	4.1 HTLE			L) (Change	L_ Addition
NAME CTOCCT ADDDCCC			4 2 NAME	LDDD:00				
STREET ADDRESS CITY-ST-ZIP			4.3 STREET					
TITLE		DELETE	4.4 CHY- ST 5.1 THUE	1-211			Change	Addition
NAME			5.2 NAME			٠ لــا		required
STREET ADDRESS			5.3 STREET.	ADDRESS				
CITY-ST-ZIP			5.4 C(1) Y - S1					
TITLE		DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
CTREET ANNOUSE			C D 07/1// 1					

14. I do hereby certify that the information supplied with this filling 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or this receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if board 0, or plan attachment with an address.