## 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 # P93000073988 (6)

FORTY SOMETHING, INC.

Principal Place of Business

CHURCH STREET EXCHANGE

Mailing Address

10146 NEWINGTON DRIVE

**FILED** 

Apr 28 1998 8:00am

Secretary of State

124 W PINE ST ORLANDO FL 32801 US					ORLANDO FL 32836 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified					
									10/22					
	rincipal Place of	I Place of Business			2a. Mailing Address				FEI Numb					Applied For
21	ulta Ant 4 -4-	to Apl # etc			Suite, Apt. #, etc.				59-3	<u> 207888</u>	<u> </u>			Not Applicable
22	uite, Apt. #, etc.			27	27				Certificati	e of Statu	s Desired	ı 🗆		Additional Required
	City & State			—	City & State			6.	Election (			ng		May Be
23			On only	28	Zip Country				Trust Fun					to Fees
	ip				30 Country			8.					current year Ir	
24	<u> </u>	25 Name and	Address of Cui	29 rrent Registered Age		0]		10	Personal Name en			v Registere	_	∐ No
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			-COURT										·	
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						L	$10^{\circ}$	מופו	<u>10. F</u>	<u>L.</u>	<u> 328</u>	36		
						8	4 City	_	,			F	<b>85</b> Zip	Code
11.	Pursuant to the	provisions	of Sections 607	0502 and 607,1508, F	lorida Statutes	the abo	ve-named	corporatio	n submits	this state	ment for t	he nurnose	of changing	ite registered
1	office or regi <b>s</b> ter	red agent,	, or both, in the St	tate of Florida. Such c	:hange was aut	lhorized I	by the corp	poration's b	poard of di	rectors. I	hereby a	ccept the a	ppointment a	s registered
	•	iliar with, a	and accept the or	oligations of, Section (	507.0505, Florid	oa Siatut	es.							
SIG	NATURE	e, typod or nr	inted name of reporting	agent and title if applicable	(NOTE F	Registered A	gent signature	required when	) reinstating\			DATE		
12.		Pr		AND DIRECTORS	p. 510 1	13.	g. n o g salaro			S/CHANG	SES TO C		ND DIRECTO	RS IN 12
TITLE	Di	>		L.	DELETE	1.1 TITLE							Change	Addition
NAME	ME JONG, TEF		rry d			1.2 NAME							-	
STREE			MINGTON DR			1.3 STRE	FT ADDRESS							
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TITLE	81				DELET <b>E</b>	2.1 THILE							☐ Change	Addition
NAME					22 NAME									
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NAME			EL JONG			3.2 NAM				_			•	
STREE			SSROADS PL			3.3 STRE	ET ADDRESS	988	Turk	iy Ho	Molk	Cir. . 327		
		ASSELBE	RRY FL			3.4. CITY		<u>wint</u>	<u>20 73</u>	riva	5, FL	<u>. 327</u>	<b>∑</b> 8	
TITLE	VF	-		L	DELETE	4.1 TITLE		$\mathcal{D}$	•	J	•		Change	Addition
NAME			HER W. JONG			4. 2 NAM								
	1 4		VINGTON DR			•	ET ADDRESS							
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NAME						6.2 NAM								•
	T ADDRESS						ET ADDRESS							
CITY-	ST-ŽIP					6.4 CITY	ST-ZIP							

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 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.