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 # 1. Corporation Name

P93000081845 (8)

ERGO, INC.

Principal Place of Business	Mailing Address
103 PINEVIEW OR	103 PINEVIEW CR
ALTAMONTE SPRINGS FL 32714	ALTAMONTE SPRINGS FL

FILED May 21 1998 8:00am Secretary of State



ALTAMONTE SPRINGS FL 32714		ALTAMONTE SPRINGS FL 32714		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					11/17/1993	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 5	Some	26 Same			59-3214252	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
27						
City & State	9	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the cu	rrent year Intangible
24	25	29	30			Yes No
	9. Name and Address of Curren	il Registered Agent			10. Name and Address of New Registered	Agent
MK	CHELS, CYNTHIA D		8	1 Name		
	103 PINEVIEW CR			2 Street A	ddress (P.O. Box Number is Not Acceptable)	
AL'	TAMONTE SPRINGS FL 32714		8	3		
			B			85 Zip Code
ı			ľ	City	FL	. 65 Zip Code
office or r agent. I a	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida, Such ch ange was ations of, Section 60 7.0 505, F	ites, the abo authorized Iorida Statul	ve-named op the corples.	corporation submits this statement for the purpose o oration's board of directors. I hereby accept the app	f changing its registered pointment as registered
SIGNATURE	Stgnature, typed or printed name of registered age	or and title if applicable (NO	TE Registered A	gent signature r	required when reinstating) DATE	
12.	OFFICERS ANI	· · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	PVTD	☐ DEL£TE	1.1 TITLI		D D // Duesa	Change X Addition
NAME	MICHELS, CYNTHIA D		1.2 NAM	:	Bill Byron 14408 Stamford Circle	
STREET ADDRESS	103 PINEVIEW CIR		1.3 \$1RE	LIADONESS	• •	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	17 55/576	1.4 CITY		Orlando, FL 32826	Ohanna de Materian
TITLE	U SAN LANGED OTALNEY A	DELETE	2.1 TITU	ľ	10 diana - O O Loviu	Change Addition
NAME	DRESS 115 BREAKERS CT 2.3		2.2 NAM		8701 GW 100 St	
STREET ADDRESS			2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP		Min 66 33176	
CITY-ST-ZIP TITLE	PUNTA GORDA FL 33950	(X) DELETE	2. 4 CHY 3.1 TITLE		D	Change Addition
NAME	FULWILER, MARY	W) precir	3.2 NAM			
STREET ADDRESS	115 BREAKERS CT.			- E1 ADDRESS	Frank Lukasik 1250 w Marion Ave, #142	
	PUNTA GORDA FL 33950			-ST-ZIP	Punta Gorda, FL 33950	
CITY-\$T-ZIP TITLE	3	☐ DÉLETE	4.1 TITLI		D	Change Addition
NAME	William R. SHINN		4. 2 NAN		Edward Irons	,,
STREET ADDRESS				ET ADDRESS	8701 SW 100 St	
CITY-ST-ZIP			4.4 City	-ST-ZIP	MIAMI FL 33176	
TITLE		DELETE	5.1 T(TL)		D	Change Addition
NAME			5.2 NAM	.	William R. SHINN	• •
STREET ADDRESS			5.3 STAL	ET ADDRESS	1805 Carillon Park DE	
CITY-ST-ZIP			5.4 CITY	-ST-ZIP	Oviedo FL 32765	
TITLE		DELETE	61 TITL			☐ Change ☐ Addition
NAME			6.2 NAM	.		
STREET ADDRESS			6.3 STRI	ET ADDRESS		
CITY-ST-ZIP	<u> </u>		6.4 CITY	- ST - ZIP		
		the second secon			die Castien 110 07(0)(i) Finside Ctatutae I further a	artifuthat the information

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.