## 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 # P9300085445 (3) TAMARACK SALES & CHARTER, INC.  |   |                             |                   |             |  |                                |         |                                  |   |
|--|---|-----------------------------|-------------------|-------------|--|--------------------------------|---------|----------------------------------|---|
| Pri  | incipal Place   | e of Business               |                   | Ma          | iling Address  |                                |         |                                  |   |
| 9628 VISTA LAKE LANE<br>SUITE 1212<br>ORLANDO FL 32621<br>US   |   |                             |                   | 8<br>S<br>C | 8628 VISTA LAKE LANE<br>SUITE 1212<br>ORLANDO FL 32821<br>US |                                |         |                                  | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified   |
|  |   |                             |                   |             |  |                                |         |                                  | 12/13/1993  |
|  | 2. Principal Place of Business                          |                             |                   |             | 2a. Mailing Address  |                                |         |                                  | 4. FEI Number Applied For   |
| 21   |   |                             | 26                |             |  |                                |         | <b>59-3214398</b> Not Applicable |   |
| Ļ  | Suite, Apt. #, etc.                                     |                             |                   |             | Suite, Apt. #, etc.  |                                |         |                                  | 5. Certificate of Status Desired S8.75 Additional   |
| 22   |   |                             |                   |             | 27   |                                |         |                                  | Fee Required  |
| Ь  | City & State  |                             |                   | <b>├</b> -1 | City & State   |                                |         |                                  | 6. Election Campaign Financing \$5.00 May Be  |
| 23   |   |                             |                   |             | 7  |                                |         |                                  | Trust Fund Contribution Added to Fees   |
|  | Zip   | <u> </u>                    |                   |             |  | <del></del>                    | Country |                                  | 8. This corporation owes or has paid the current year Intangible  |
| 24   |   | 25                          |                   | 29          |  | 30                             |         |                                  | Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent   |
|  |   |                             | Address of Curren | i Hegist    | erea Agent   |                                | H       | Name                             | 10. Name and Address of New Registered Agent  |
|  |   | HANFRAU, JOSE               |                   |             |  | ľ                              | "       | INDITIE                          |   |
| 5401 SOUTH KIRKMAN ROAD<br>SUITE 505   |   |                             |                   |             |  | 6                              | 2       | Street Add                       | dress (P.O. Box Number is Not Acceptable)   |
| ORLANDO FL 32819   |   |                             |                   |             |  |                                |         |                                  |   |
|  |   |                             |                   |             |  |                                |         | City                             | 85 Zip Code   |
|  |   |                             |                   |             |  |                                |         |                                  | FL 67 200 cods  |
| <ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-roffice or registered agent, or both, in the State of Florida, Such change was authorized by the agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.</li> </ol> |   |                             |                   |             |  |                                |         | the corpora                      | rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered |
| SI   | GNATURE   |                             |                   |             |  | 71 - D                         |         |                                  | uired when reinslating) DATE  |
| 12   |   | Signature, typied or printi | OFFICERS AND      |             |  | 13.                            | - gen   | n signature requ                 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |
| 711  |   | D                           |                   |             | DELETE   |                                |         | Т                                | Change Addition   |
|  |   | ROCA, ODO                   | N                 |             |  | 1.1 TITL                       |         | ļ                                |   |
| l  | NAME NOUA, UDON STREET ADDRESS 8628 VISTA LAKE LANE STE |                             |                   | 1212        | 1  | 1.2 NAME<br>1.3 STREET ADDRESS |         |                                  |   |
| 1  |   | ORLANDO F                   |                   | . 1212      |  |                                |         |                                  |   |
| TIT  | Y-ST-ZIP  | UNLANDO I                   | <u>L</u>          |             | DELETE   | 1.4 CITY                       |         | - ZIP                            | Change Addition   |
|  |   |                             |                   |             |  | 2.1 1111                       |         |                                  | Change C radiion  |
| NA   | · -   |                             |                   |             |  | 2.2 NAM                        |         |                                  |   |
| STREET ADDRESS   |   |                             |                   |             |  |                                | ADDRESS |                                  |   |
|  | Y-ST-ZIP  | _ <del></del>               |                   |             | C Secret   | 2. 4 CIT                       |         | T-ZIP                            | Change Addition   |
| TITE   | 1   |                             |                   |             | L DELETE   | 3.1 TITL                       |         |                                  | Change Addition   |
| NA   | · -   |                             |                   |             |  | 3.2 NAM                        |         |                                  |   |
| 1  | REET ADDRESS  |                             |                   |             |  |                                |         | ADDRESS                          |   |
| _  | Y-ST-ZIP  |                             |                   |             | TT on Fee  | 3 4. CITY                      |         | T-ZIP                            |   |
| ודוז   |   |                             |                   |             | ☐ DELETE   | 4.1 TITL                       |         |                                  | Change Addition   |
| NA   |   |                             |                   |             |  | 4. 2 NAM                       |         |                                  |   |
| STF  | REET ADDRESS  |                             |                   |             |  | 4.3 STR                        | ET A    | address                          |   |
| -  | Y-ST-ZIP  |                             |                   |             |  | 4.4 CfTY                       |         | - ZIP                            |   |
| TIT  | LE  |                             |                   |             | DELETE   | 5.1 TITL                       |         |                                  | ☐ Change ☐ Addition   |
| NA!  | ME  |                             |                   |             |  | 5.2 NAM                        | E       |                                  |   |
| STF  | NEET ADDRESS  |                             |                   |             |  | 5.3 STRE                       | ET A    | ADDRESS                          |   |
| CIT  | Y-ST-ZIP  |                             |                   |             |  | 5.4 CITY                       | -ST     | r-ZIP                            |   |
| TIT  | L <b>E</b>  |                             |                   |             | DELETE   | 6.1 TITL                       | E       |                                  | ☐ Change ☐ Addition   |
| NA   | ME .  |                             |                   |             |  | 6.2 NAM                        | E       |                                  |   |
| STF  | REET ADDRESS  |                             |                   |             |  | 6.3 STRE                       | ET A    | ADDRESS                          |   |
| CIT  | Y-ST-ZIP  |                             |                   |             |  | 6.4 City                       | - ST    | I-ZIP                            |   |

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 to some employee and 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 attay inner twin the address.

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4.30.98

407-376-9464

**FILED** 

May 19 1998 8:00am

Secretary of State