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 # P94000011712 (4)

MATT G. FIRESTONE, P.A.

Principal Place of Business

Mailing Address

FILED Mar 31 1998 8:00am Secretary of State



108 SOUTH COURT AVE. 108 SOUTH COURT ORLANDO FL 32801 ORLANDO FL 32801				DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified	
- 5) ((5)		A A A - Ni - a B adal- a a a		02/08/1994	Anathad Fan
	lace of Business	2a. Mailing Address	hingtonst	4. FEI Number	Applied For
21 4 6	WAShington St.	26 14 E. UFN Suite, Apt. #, etc.	rip garisi		Not Applicable \$8.75 Additional
27 Stute 306 27 Stute 30			6	5. Certificate of Status Desired	Fee Required
city & State			FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 32801 25 USA 29 32801 30			Country	This corporation owes or has paid to Personal Property Tax due June 30	. 🏿 Yes 🔲 No
				10. Name and Address of New Regis	tered Agent
FIRESTONE, MATT G					Hone. I
AND AND POLICE ALP			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	1. (<)
ORLANDO FL 32801				E. Washings	64 0t.
83 (5) (+				1+8,306	
			84 City OV	riando	FL 85 3 280/
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE MATT G. FIRESTONE 3-26-98					
SIGNATURE	Signature, typed or printed name of registered agent a	nd little if applicable (NOTE R	epistered Agent signature requir	red when reinstaling)	DATE
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	0	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FIRESTONE, MATT G		1.2 NAME		
STREET ADDRESS	108 SOUTH COURT AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801	Delete	14 CITY-ST-ZIP		Character Addition
TITLE		DELETE	21 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		Periode	2. 4 CiTY-ST-ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE	,	C change C Addition
NAME		i	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3 4. CITY - ST - ZIP		Change Addition
TITLE		☐ DETEIE	4.1 TITLE		Change C Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DOLLETE	4.4 CITY-ST-ZIP		Change Addition
TITLE		DELETE	5.1 TITLE		C) change C Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE			6.1 TITLE		C cuando (C vocition)
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-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 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.