FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DATE POACOCOLOGICA (O) 5245

1. Corporation	MENT # P940 SUCCESS INCORPORAT	00012840 (2)		
1.7.1.	JOCOLOG INCONFONAL	EU		 	III 30 18 31 81 41 8 1 1181 1181 1181 1181 1181
Principal Place of Business		Mailing Address			
2100 POLO CLUB DR., APT. 203		2100 POLO CLUB DR., APT. 203			
KISSIMMEE	FL 34741	KISSIMMEE FL 3474			
				3. Date Incorporated or Qualified 02/14/1994	3a. Date of Last Report 04/27/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		C Floation Comparing Figure	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	B. This corporation has liability for	Added to Fees
24	25	29	30	Florida Statutes	s 🔲 No
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New I	Registered Agent
HAVEO	BODERT C		81 Name		
HAYES, ROBERT S 441 W. VINE STREET			82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
KISSIMMEE FL 34741			83		
1,00,00	IIEC (E 07) 7 (1
			84 City		FL 85 Zip Code
11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the above-named corpor	ation submits this statement for the pu	
	ed agent, or both, in the State of Fil h, and accept the obligations of, Se			ration submits this statement for the purific of directors. I hereby accept the app	ointment as registered agent. I am
SIGNATURE _					
12.	Signature typed or printed name of registered ag		OTE: Flegistered Agent signature require		DATE
JELF	DPT OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
NAME	TURCK, LANCE	בן טבננייב	1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	2100 POLO CLUB DR., AP	T. 203	1.3 STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL 34741	200	1.4 CITY-ST-ZIP		
TETLE	DVS	DELETE	2 1 TITLE		Change Addition
NAME	TURCK, JOANNE		2.2 NAME		
STREET ADDRESS					·
CITY - ST - ZIP	KISSIMMEE FL 34741		24 CITY-ST-ZIP		
TITLE		☐ DELETE	3. 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDUCCO			3.2 NAME		
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		☐ DELETE	3.4 CITY-ST-ZIP 4. 1 TITLE		
NAME		beerie	4. F TITLE 4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-ST-ZIP		
TIT_E		☐ DELETE	5. 1 TITLE		Change Addition
NAME			5.2 NAME		- · · · · · · · · · · · · · · · · · · ·
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		···	54 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida 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 it made under oath; that I am an officer of 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.

SIGNATURE the fund Lance Tirch

1/25/96 407-955-9033

CR2E034 (12/95)