## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## POCUMENT # P94000014056 (3)

## **FILED** May 19 1997 8:00am Secretary of State

		Mailing Add 71 E. CHRU ORLANDO F				· · · · · · · · · · · · · · · · · · ·	3. Date Incorporated or Qualified 3a. Date of Last Report	·
							02/21/1994 03/26/1996	n
2. Principal Place of Business 2a. Mailing Address				** *** ******			4. FEI Number Applier	d For
21 26								plicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27							5. Certificate of Status Desired Fee Requir	
City & Stat	0	City & S	itate				6. Election Campaign Financing \$5.00 May	
28							Trust Fund Contribution Added to Fe	
Zip	Country	Zφ		h	intry		8. This corporation has liability for intangible tax under s. 199	9.032
24	9. Name and Address of Currer	29	ent	30	r		Florida Statutes Yes No  10. Name and Address of New Registered Agent	
		w viehistolen vå			81	Namo	To. Hame and Address of New Registered Agent	
JUNE, ROHLAND A II 71 E. CHRUCH ST.							ddagaa (D.O. Day Marshari in Mar Angel	
ORLANDO FL 32801					82	Street Ad	ress (P.O. Box Number is Not Acceptable)	
<b>V.</b>					83			
					84	City	85 Zip Code	e
11 Durament	to the provisions of Continue CO7 MC	20 1 607 1600	en en bio		[ <u></u> ]		FL i l i	
office or r agent. I a SIGNATURE							orporation submits this statement for the purpose of changing its reg ration's board of directors. I hereby accept the appointment as regi	stered
12.	Signature, typed or printed name of registered agr OFFICERS AN	ent and title if applicable ID DIRECTORS	(CN)	If : Registere	d Age	nt signature rec	equired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	112
TITLE	Ď		DELETE	1.1 1	11.6	T		Addition
NAME .	JUNE, ROHLAND A II			1.2 N	MM.F			
STREET ADDRESS	71 E. CHRUCH ST.			1.3 \$	IREE1	ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801	····	Dr. Etc	1.4 C		1-ZIP		1
YITLE NAME		ι	DELETE	2.1 10			Change	Addition
STREET ADDRESS				2.2 N		ADDRESS		
CITY+ST-ZIP						61-7IP		
TITLE			DELETE	8.1 TI			Change	Addition
NAME				8.2 N	AME		•	
STREET ADDRESS				8.3 S	RECT	ADDRESS		
CITY-ST-ZIP		·	011575			ST - 71P		1 4" (1955
NAME			T OTTELE"	4.1 1I			☐ Change ☐	Addition
STREET ADDRESS		•		4.2 N		ADDRESS		
CITY-ST-ZIP				4.4 CI				
TITLE			DELETE	5.1 TI			Change	Addition
NAME				5.2 N	AME			
STREET ADDRESS				\$.3 S1	REE 1	ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	1 660 555	5.4 C		1 - 210		1
TITLE		L	DÉLETE	6.1 1)			Ctiange	Addition
NAME STREET ADDRESS				6.2 N		ADDUCCO	•	
CITY-ST-ZIP						ADDRESS		
14 Lela hazat				6.4 C	11-5	1-712	THE THE THE TAXABLE AND ADDRESS OF THE THE TAXABLE AND ADDRESS OF THE TAXAB	

I do 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.