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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90151 031 ***150.00

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DOCUMENT # P94000016998

HARBOUR OAKS INVESTMENTS CORPORATION

Principal Pla	ce of Business	Mailing Address		-				
744 HIGHLAND AVE. 744 HIGHLAND AVE. ORLANDO FL 32803 ORLANDO FL 32803						DO NOT WRITE IN THIS	S SPACE .	
						3. Date Incorporated or Qualifed 12/23/1993		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For
21		26			59-3232263		Not Applicable	
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		5 Additional
22		27						Required
City & State		City & State				Election Campaign Financing Trust Fund Contribution	Trust Fund Contribution Added to Fees	
Zip	Country	Zip		ıntry		8. This corporation owes the current year In		m.,
24	25	29]30			Personal Property Tax.	Yes	□No
	9. Name and Address of Cur	rent Registered Agent		ļ.,		10. Name and Address of New Registered	Agent	
1/10	HED CUADICOM			81	Name			!
	ller, charles w 4 Highland Ave.			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	LANDO FL 32803			83				
				L			loc 2	in Code
				84	City	Fl	- 85 Z	ip Code
office of agent. I	r registered agent, or both, in the Sta am familiar with, and accept the ob	ate of Florida. Such change w ligations of, Section 607.0505	as authorize , Florida Stat	d by lutes	the corporation	oration submits this statement for the purpose o on's board of directors. I hereby accept the appo	iniment as	
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PS	☐ DELET	E 1,1 T	TLE			☐ Chan	ge 🔲 Addition
NAME	KELLER, CHARLES W		1.2 N	AME	ĺ			!
STREET ADDRES	s 744 HIGHLAND AVE.		1.3 S	TREET	TADDRESS			
CITY-ST-ZIP	ORLANDO FL 32802		1.4 0	ITY-S	T- ZIP			
TITLE		☐ DELET	E 2.1 T	ITLE			Chan	ge 🔲 Addition
NAME			2.2 N	AME				
STREET ADDRES	ss		2.3 S	TREET	T ADDRESS			
CITY-ST-ZIP			2.40	CITY-S	ST-ZIP			
TITLE		☐ DELET	E 3.1 T	ITLE			Chan	ge Addition
NAME			3.2 N	AME				
STREET ADDRES	ss		3.3 S	TREET	T ADDRESS			ļ
CITY-ST-ZIP			3.4. 0	CITY-S	ST-ZIP			
TITLE		☐ DELET	E 4.1 T	ITLE			Chan	ge
NAME			4.21	NAME				
STREET ADDRES	ss		4.3 S	TREE	T ADDRESS			
CITY-ST-ZIP				iTY-S	T-ZIP			
TITLE	·	☐ DELET		ME			☐ Chan	ge Addition
NAME				AME				
STREET ADDRES	ss		538	TREE	TADDRESS			
CITY-ST-ZIP	<u> </u>			ITY-S	T-ZIP			
TITLE		☐ DELET	E 6.17	ITLE			Chan	ge
NAME			6.2 N	AME				
STREET ADDRES	ss		6.3 S	TREE	T ADDRESS			
A 777 A 710	ì		640	ITY-S	T-7IP			

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, with all other like empowered.

SIGNATURE:

(407)648-8541