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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DIVISION OF CORPORATIONS							Scoretary or state	
1. Corporati	JMENT ion Name MART, IN	1 0 100	001770	8 (6)				
Principal Place of Business Mailing Address								
1468 E. MICI			200 S. ORANGE AVE.					
ORLANDO FL 32808			SUITE 2300 Orlando Fl 32801-3432					DO NOT WRITE IN THIS SPACE
 			US					3. Date Incorporated or Qualified 03/07/1994
	Place of Busi	ness	2a. Mailing Address					4. FEI Number Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.					59-3246060 Not Applicable \$8.75 Additional
22			27					5. Certificate of Status Desired Fee Required
City & State			City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip		Country	Zip		Cou	ntry		8. This corporation owes or has paid the current year Intangible
24	o Name	25 and Address of Currer	29 nt Registered An	ent	[30]			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
A.G.C. CO.						81	Name	19. Hallie and Hadrood of Harr Hagiston as Page III
200 S ORANGE AVE						82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
SUITE 2300						83		
ORLANDO FL 32801								
						84	City	FL 85 Zip Code
11. Pursuant office or	t to the provise registered as	sions of Sections 607.050 gent, or both, in the State	02 and 607.1508, of Florida, Such	Florida Statut change was	tes, the at authorized	ove by	 named co the corpor 	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
agent.i:	am familiar w	ith, and accept the oblig	ations of, Section	607.0505, Fli	orida Stati	utes.		
SIGNATURE	Signature, types	d or printed name of registered age		(NOI		J Ager	nt signature rec	equired when reinstating) DATE
12.	1 05	OFFICERS AN	ID DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE NAME		RODRIGUEZ, JAIME A			1.1 TIT 1.2 NA			Li Grange Li Addition
STREET ADDRESS		MICHIGAN AVE.					ADDRESS	•
CITY-ST-Z#P	ORLAND				1.4 CII		1	
TITLE	91,			DELETE	2111			☐ Change ☐ Addition
NAME					2.2 NA	ME		
STREET ADDRESS					2.3 ST	REET A	ADDRESS	
CITY-ST-ZIP					2. 4 CI	TY-SI	r-ZIP	
TITLE			L	_] DELETE	3.1 TIT			! Change Addition
NAME					3.2 NA			
STREET ADDRESS	İ						ADDRESS	
CITY-ST-ZIP TITLE	 			DELETE	3.4. CI 4.1 TIT		1-211	Change Addition
NAME	1		_		4.2 N/		ĺ	
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP					4.4 CIT			
TITLE				DELETE	5.1 TIT	LE		☐ Change ☐ Addition
NAME					5.2 NA	ME		
STREET ADDRESS					5.3 STI	REET A	ADDRESS	
CITY-ST-ZIP	<u> </u>		····	7 00. 500	5.4 CII		- ZIP	
TITLE	1		L	DELETE	6.1 TiT			☐ Change ☐ Addition
NAME STREET ADDRESS	1				6.2 NA		ADDRESS	
AINCEL AUUMESS	r				■ 0.3311	ILL!	INDUNESS I	

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.

2991

6.4 CITY-ST-ZIP

FILED

Mar 11 1998 8:00am

Secretary of State