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

DOCUMENT # P94000024557

1. Corporation Name

AA AREA REALITY, INC.

Principal Place of Business 200 GOLDEN BAY BLVD. OAK HILL FL 32759

2. Principal Place of Business

21

Mailing Address

621 E. HORATIO AVENUE MAITLAND FL 32751

2a. Mailing Address

26

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90112 006 ***150.00



DO NOT WRITE IN THIS SPACE	

3. Date Incorporated or Qualifed

03/28/1994 4. FEI Number

59-3415219

Suite, Apt. :	#, etc.	—	Apt. #, etc.			5. Certificate of Status Desired Fee Required			
22		27 City & 3	State						
City & State		28	State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Zip		Country		8. This corporation owes the current year Intangible			
24	25	29	30	<u> </u>		Personal Property Tax.			
	9. Name and Address of Current	Registered A	gent			10. Name and Address of New Registered Agent			
				81	Name				
DOWDA, CLAUDE M				82	82 Street Address (P.O. Box Number is Not Acceptable)				
259 GOLDEN BAY BLVD									
OAK HILL FL 32759			83	83					
				84	City	85 Zip Code			
						FL			
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 re	egistered agent, or both, in the State o m familiar with, and accept the obligati	i Florida S⊎ch	change was auth	onzed by	the corp	poration's board of directors. Thereby accept the appointment as registered			
	*								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable	. (NOTE: Re	gistered Ager	it signature	required when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P		☐ DELETE	1.1 TITLE		☐ Change ☐ Addition			
NAME	DOWDA, CLAUDE M			1.2 NAME					
STREET ADDRESS	200 GOLDEN BAY BLVD.			1.3 STREE	TADDRESS				
CITY-ST-ZIP	OAK HILL FL 32759			1.4 CITY-S	T-ZIP				
TITLE	ST		☐ DELETE	2.1 TITLE	_	☐ Change ☐ Addition			
NAME	DOWDA, CLAUDE M			2.2 NAME					
STREET ADDRESS	259 GOLDEN BAY BLVD			2.3 STREET	TADDRE\$S				
CITY-ST-ZIP	OAK HILL FL 32759			2. 4 CITY-5	ST-ZIP				
TITLE			☐ DELETE	3.1 TITLE		☐ Change ☐ Addition			
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	TADDRESS				
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP				
TITLE			☐ DELETE	4.1 TITLE		☐ Change ☐ Addition			
NAME				4.2 NAME					
STREET ADDRESS				4 3 STREE	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				
TITLE			☐ DELETE	5.1 TITLE		☐ Change ☐ Addition			
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	TADDRESS	5			
CITY-ST-ZIP				5.4 CITY-S	T-ZIP				
TITLE			DELETE	6.1 TITLE		☐ Change ☐ Addition			
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREE	T ADDRESS				
CITY-ST-ZIP				6.4 CITY-S	T-ZIP				
VIII-31-ZIF						-d in Continu 440 07/3)/i) Elevida Statutos I further codify that the information			

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(1), Fideway states and use the control of the corporation of the corporation

SIGNATURE:

aude M Dowda

4-26.99

Applied For

Not Applicable

CR2E034 (11/98)