Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90134 038 ***150.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000029980

1. Corporation Name

Principal Place of Business

CENTRAL FLORIDA MANAGEMENT GROUP, INC.

4021 NORTH ARMENIA AVENUE SUITE 102 TAMPA FL 33607		4021 NORTH ARMENIA AVENUE SUITE 102 TAMPA FL 33607			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/18/1994						
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number					fied For
21	<u> </u>	26			59-32	36139				Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 Certifca	te of Status Desired	i 🗆	•		dditional	
22		27							ee Req	'	
City & State		City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees						
23	Country Zip			ntry			rporation owes the o	current vear Intai			
24	25 29 30			Personal Property Tax.					ŬYe	s [JNo _
	g Name and Address of Curre	- <u></u>	,				and Address of Ne	w Registered A	gent		
				81	Name						
Kopelovich, Joseph 4021 North Armenia Avenue			ŀ	82 Street Address (P.C			Number is Not Acce	eptable)			
	E 102			83							
TAM	PA FL 33607			84	City				85	Zip C	ode
					•			F <u>L</u>	1 1	•	
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	e of Florida. Such change was au ations of, Section 607.0505, Flori	ida Statu	ites.	tne corpor	ration's board of d	irectors. I hereby ac	cept the appoint	ment	as reg	istered
	Signature, typed or printed name of registered age	ND DIRECTORS	13.	Agen	: asgnature rec		NS/CHANGES TO		DIR	ECTOR	2S IN 12
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64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

MURECOVICH

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.