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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000039817 (9)

FILED Jan 16 1998 8:00am Secretary of State

strictly starters, Inc.					
				A ARRIAGAT ARA JERUJ STOTI BANTA BATAL SARAT ANTAKA	1913 1870 1810 1801 1801 1801
j					
Principal Place of Business Mailing Address				- I TOOLIGEOR HIS LOUIL BROIK BRIGH SURIK ENIK DANDE	
5238 CYPRI	ESS CREEK DR.	5238 CYPRESS CREEK	DR.		
ORLANDO FL 32811 ORLANDO FL 32811					Caracteria
US		US		DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified	
2. Principal I	Place of Business	2a. Mailing Address		05/19/1994 4. FEI Number	
21	Tago of Edolficac	26	-	· • • •	Applied For Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		59-3255542	- \$8.75 Additional
22 27			5. Certificate of Status Desired	Fee Required	
City & State City		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	ırrent year Intangible
24	25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New Registered	Agent
WILLIS, MICHAEL N					
136 PARK ST			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32803			83		
			84 City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607.056	oration submits this statement for the purpose of	f changing its registered		
office or agent. I a	registered agent, or both, in the State am familiar with, and accept the oblic	e of Florida, Such change was pations of Section 607,0505. Fl	authorized by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE		,4110110 01, 00011011 001 10040, 71	onda otatoloo.		
	Signature, typed or printed name of registered ag	ent and title if applicable. (NO	E: Registered Agent signature require	ed when reinstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	S	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PERRY, ELIZABETH S		1.2 NAME		İ
STREET ADDRESS	5238 CYRESS CREEK DR		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ORLANDO FL	DELETE	1.4 CITY-ST-ZIP		
	'	T DETEIG	2.1 TITLE		Change Addition
NAME	PERRY, FLOYD D JR. 5238 CYPRESS CREEK DR.		2.2 NAME	•	
STREET ADDRESS	ORLANDO FL		2.3 STREET ADDRESS		1
CITY - ST - ZIP	ONLANDO FL	☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	· '5	☐ Change ☐ Addition
NAME			3.2 NAME		T outside T vanifion
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		Consulte Cardonou
STREET ADDRESS			4.3 STREET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. Lhereby c	ertify that the information supplied w	ith this filling does not qualify for		Section 119 07/3\(\text{i}\) Fiorida Statutas, i further of	ortify that the information

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.

SIGNATURE: Elizabeth Sterry 17/98 407-351-938