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

| 1. Corporation | BRANDON, INC | JU47485 (8 | o) | | |
|-----------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Principal Place of Business | | Mailing Address | | | A CONTROL OF THE STATE OF THE S |
| 5630 HANSEI Orlando fl | L AVENUE L 32009 | 10501 SATINWOOD CIRCLE ORLANDO FL 32825 | | | |
| US | - | | | | DO NOT WRITE IN THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | 06/20/1994 4. FEI Number 59327/37/ Applied For |
| 1 | | 26 | | | NOT APPLICABLE Not Applicable |
| Suite, Apt. #, etc | | Suite, Apt. #, etc. | | | 5 Contitionals of Status Desired \$8.75 Additional |
| 2 City & Ctote | | [27] | | | Fee Required |
| City & State | | City & Stato | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | 28 | Country | , | R. This corporation owes or has paid the current year Intangible |
| i] | 25 | 29 | 30 | | Personal Property Tax due June 30. Yes No |
| | 9. Name and Address of Current | and a complete of the complete | | T | 10. Name and Address of New Registered Agent |
| | ROWN, SONYA | | 81 | Name | e |
| | 501 SATINWOOD CIRCLE | | 82 Stre | | t Address (P.O. Box Number is Not Acceptable) |
| OR | RLANDO FL 32825 | | 83 | | |
| | | | | | |
| | | | 84 | Cily | FL 85 Zip Code |
| SIGNATURE | Stimular Cases as cover come of pass of time. OFFICERS AND | | 13. | eul signature | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITLE | BROWN, SONYA | ☐ DETETE | 1.1 TITLE | | |
| TREET ADDRESS | 10501 SATINWOOD CIRCLE | | 1.2 NAME 1.3 STREET | ADDRESS | WEBB, SONYA |
| ITY-ST-ZIP | ORLANDO FL | | 1.4 CHY-5 | | |
| ITLE | | DITTE | 2.1 TIFLE | | . Change Additio |
| AME | | | 2.2 NAMI | | |
| REET ADDRESS | | | • | ADDRESS | |
| ITY-ST-ZIP | | □ pitëi€ | 2.4 Cily- | S1 - ZIP | Change Addition |
| IFLE | | CT DISTIF | 3.1 TITLE | | L Change L Adollo |
| AME Freet Address | | | 3.2 NAME | ADDRESS | |
| TY-ST-ZIP | | | 3.4. CHY- | | |
| LE | | DELETE | 41 THILE | · · · · · · · · · · · · · · · · · · · | Change Additio |
| IAME | | | 4. 2 NAME | | |
| reet address | | | 4.3 STREET | ADDRESS | ; |
| TY+S1-2IP | | | 44 CITY-5 | 31 - 71P | |
| LE | | DETENE | 5.1 1171.6 | | Change Additio |
| ME | | | 5 2 NAME | | |
| REET ADDRESS | | | 1 | ADDRESS | ; <u> </u> |
| ITY-ST-ZIP FLE | | Detete | 5.4 CHY-5 6.1 WHE | 01 · 71P | ☐ Change ☐ Additio |
| AME | | Est certific | 6.2 NAME | | C owner C recent |
| REET ADDRESS | | | | ADDRESS | |
| TY-ST-20P | | | 6.4 City - 5 | | |
| | ortify that the information supplied wit | bathie til nor done pet grafil | | | ited in Section 119 07(3)(i) Florida Statutes, I further certify that the information |

Indicated on this annual report or suppliernental 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 of the rescriver 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.

Sonya Brown-WEBB

FILED

May 11 1998 8:00am

Secretary of State

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