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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P94000049936 (5)

AMBIANCE, INC.

Principal Place of Business

Mailing Address

**FILED** Jan 20 1998 8:00am Secretary of State



6370 US 1 N BUILDING 1 ST AUGUSTIN US		PO BOX 3445 ST AUGUSTINE FL 32085 US		DO NOT WRITE IN THI  3. Date Incorporated or Qualified  07/01/1994	S SPACE	
2. Principal P	lace of Business	2a. Mailing Address	-1-0714	4, FEI Number	Applied For	
21 6480 Suite, Apt.	D LIS I NORTH	26 6480 LI.S. 1 Suite, Apt. #, etc.	MORTH	59-3255381	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	GUSTINE, FL	City & State 28 ST. Augu ST	NE , FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 3200			Country O US	<ol> <li>This corporation owes or has paid the operational Property Tax due June 30.</li> </ol>	Yes 🗌 No	
	g. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registers	d Agent	
	gelder, hendrik h		81 Name	, "		
4251 PALMETTO ST				62 Street Address (P.O. Box Number is Not Acceptable)		
51	AUGUSTINE FL 32015		83			
			84 City	F	85 Zip Code	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	le of Florida. Such change was au	thorized by the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered	
SIGNATURE.						
12.	Signature, typed or printed name of registered a	OND DIRECTORS	Registered Agent signature res	ADDITIONS/CHANGES TO OFFICERS AI	ND DECTOR IN 10	
TITLE	D	DELETE	1.1 11TLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition	
NAME	OPGELDER, HENDRIK H	—	1.2 NAMÉ			
STREET ADDRESS	4251 PALMETTO STREET		1.3 STREET ADDRESS	•		
CITY-ST-ZIP	ST AUGUSTINE FL	-	14 CITY-ST-ZIP,			
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	HENDRIKS, ALEXANDER M	. •	2.2 NAME			
STREET ADDRESS	BEUKELSZOONWEG 2, 546	6	2.3 STREET ADDRESS			
CITY-ST-ZIP	VEGHEL NE		2. 4 CITY - S1 - ZIP	4.		
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			33 STREET ADDRESS			
CITY-ST-7IP		Diction	3.4. CITY-ST-7IP		Change Addition	
TITLE		☐ DELETE	4.1 TIBLE		Change Addition	
NAME PIDEEL ADVOCCE			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	L <u>-</u>	DELETE	4.4 CITY - ST - ZIP 51 TITLE		Change Addition	
NAME		— ******	52 NAME			
STREET ADDRESS			5.3 STREFT ADDRESS			
CITY-\$1-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	٨.		6.4 CITY-ST-ZIP			
	ertify that the information supplied	with this filing done not quality for		in Section 119 07(3)(i) Florida Statutes, I further	corlify that the information	

indicated on this annual report or supplying twin this ning odes not quanty for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supply individual private 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 index phone in the supplying 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 the attachment with an address.