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

DOCUMENT # P94000055983 (8)

EATWISE, INC.

DIVISION OF CORPORATIONS

Feb 10 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address			
919 W. SR 436 SUITE 280	919 W SR 436 Suite 280			
ALTAMONTE SPRINGS FL 32714	ALTAMONTE SPRINGS FL	32714	DO NOT WRITE IN THIS SPACE	
US	US		3. Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address	·	07/27/1994 4. FEI Number	Applied For
21	26		59-3269683	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc			\$9.75 Additional
22	[27]		6. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 Žip	Country	Trust Fund Contribution	
24 25	. → ¬	[0]	 This corporation owes or has paid the Personal Property Tax due June 30. 	e current year intangible X Yes No
g. Name and Address of Current		<u> </u>	10. Name and Address of New Registe	
HOYT, JOHN W.		81 Name	Shala Hour To	
919 W SR 436		82 Street Add	ohn W. Hoyt, JR dress (P.O. Box Number is Not Acceptable)	, <u>.</u>
SUITE 280		930	RRENNAM PLACE	· ·=··································
ALTAMONTE SPRINGS FL 32714		83		
		84 City		85 Zip Code
44 B	Sand 607 1500 Florida Ctatutas			FL 32750
11. Pursuant to the provisions of Sections 607 0502 office or registered agent, or both, in the State of	r and 607, 1508, Florida Statules of Florida, Such change was au	thorized by the corpora	poration submits this statement for the purpo ation's board of directors. I hereby accept the	appointment as registered
agent. Len tanvillar with, and accept the obliga			- F./.	11.000
SIGNATURE Sugrestives bypost are political in Color of Secretary in	Ohn W. HoyT T	R. PRESIDEA Registerud Agent signature requ	7T FERM Jred when reinstaling) Di	ARY 4,1998
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TIFLE PSD	☐ DELETE	1.1 TITLE		Change Addition
HOYT, JR. JOHN W.		1.2 NAME		
STREET ADDRESS 919 W SR 436 STE 280		1.3 STREET ADDRESS		
CITY-ST-ZIP ALTAMONTE SPRINGS FL	DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE	□ Drreit	2.1 TITLE 2.2 NAME		Ci cuside Ci vonnon
NAME STREET ADDRESS		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY - ST - ZIP		
TITLE	☐ DEL€TE	3.1 TITLE	·	Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME	בן טנננונ	. 5.1 TITLE 5.2 NAME		Change C Adultur
STREET ADDRESS		5.2 NAME 5.3 STREET ADDRESS		
CITY-SI-ZIP		5.4 CITY - ST - ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		

6.4 CITY - ST - ZIP 4. Thereby 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 supplierrental 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 2016 (annual report 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 2016 (annual report 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 2016 (annual report 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 2016 (annual report 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 2016 (annual report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.

JOHN W. HOUT JE. PROSIDENT 2/4/98 (407)869.1300