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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #** P94000059006 (4)

FILED Mar 23 1998 8:00am Secretary of State

Principal Place	VENUE CONSTRUCT	ON COMPANY Mailing Addr								
507 N. NEW YORK AVE. P.O. BOX 2796										
SUITE 301 WINTER PARK FL 32790 US										
							DO NOT WRITE IN THIS SPACE			
US							3. Date Incorporated or Qualifi	ed		
6 Drivers ID	lane of D. masses	Ta Mailana	4-1				08/08/1994			
2, Principal P	lace of Business		2a. Mailing Address				4. FEI Number			oplied For ot Applicable
			Suite, Apt. #, etc.			59-3261927			Additional	
22	,	27					5. Certificate of Status Desired			equired
City & State City & State							6. Election Campaign Financin	<u></u> -	\$5.00	May Be
23		28	28				Trust Fund Contribution Added to Fees			
Zip	Country	Zφ	· · · · · · · · · · · · · · · · · · ·				8. This corporation owes or has paid the c		urrent year Intangible	
24	25	29	30] No
	g, Name and Address of	Current Registered Age	nt				10, Name and Address of Nev	Registere	d Agent	
JOH	HNSON, LISA A			81	Name					
	O WINTER PARK RD.			82	Street	Addres	ss (P.O. Box Number is Not Acce	ptable)		
WINTER PARK FL 32789										
				63						
				84	City				85 Zip	Code
		···					ration submits this statement for n's board of directors. I hereby a	F		
SIGNATURE	Signature typed or printed name of regi	RS AND DIRECTORS		Registered Age	nt signature	a required	when reinstating) ADDITIONS/CHANGES TO C	DATE FFICERS AI	ND DIRECTOR	RS IN 12
TITLE	PD		DELETE	1.1 TITLE		į			Change	Addition
NAME	JOHNSON, LISA	_		1.2 NAME		ŀ				
STREET ADDRESS	1770 WINTER PARK RE).		1.3 STREET		ļ				
CITY-ST-ZIP	WINTER PARK FL	·	DELETE	1.4 CITY-S	T-ZIP	_			5 (1)	[**] **********
TITLE	S DELETE		DELETE			S			Change	L Addition
NAME	WILSON, BRENDA R.	4440		2.2 NAME		EE	ic johurou			
STREET ADDRESS	100 S. INTERLACHEN, WINTER PARK FL	#110		2.3 STREET			12 Cortez	0 fb		
CITY - ST - ZIP TITLE	WINTER FARINTL		DELETE	2.4 CITY-5 3.1 TITLE	1-212	144	lanta, GA 303	6D	Change	Addition
NAME		L		3.2 NAME						
STREET ADDRESS				3.3 STREET	40100ECC					
CITY-ST-ZIP				3.4. CITY-S						
TITLE			DELETE	4.1 TITLE	4.0	 			Change	Addition
NAME		_		4. 2 NAME					.	
STREET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-7IP				4.4 CITY - S						
TITLE		C.,	DELETE	5.1 TITLE					Change	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS	1				
CITY-ST-ZIP				5.4 CITY-S	T-21P					
TITLE			DELETE	6.1 TITLE	-				Change	Addition
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREET	ADDRESS					
CITY-ST-ZIP				6.4 CITY - S	T-ZIP	<u> </u>				

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 trusted to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an extraction with an address.

SIGNATURE

407-647-5455