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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000059395 (1)

## FILED Apr 18 1997 8:00am Secretary of State

Principal Place of Business Mailing Address  5784 DONNELLY CIRCLE ORLANDO FL 32821-7662  Mailing Address  5784 DONNELLY CIRCLE ORLANDO FL 32821-7662									
	•			3. Date Incorp 08/10/19	porated or Qualified		ate of Last F /01/1996	Report	
2. Principal Place of Business	2a. Mailing Address			4. FEI Numbe		1 00,	<del>, , , , , , , , , , , , , , , , , , , </del>	pplied For	
21]	26			59-3258			<del> </del>	ot Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate	of Status Desired		<b>v</b>	Additional equired	
City & State	City & State				mpaign Financing			May Be	
Zip Country	28 Zip	Coun	ry	8. This corpor	Contribution ration has liability fo	r intangible	e tax under s	to Fees s. 199.032,	
24   25	29	30		Florida Stat		☐ Yes			
g, Name and Address of C	urrent Registered Agent		1 Name	10. Name and	Address of New R	legistered	Agent		
LENZ, MATTHEW A 5784 DONNELLY CIRCLE						:			
ORLANDO FL 32839-3116		18		ldress (P.O. Box Nur	nber is Not Accepta	able)			
		l°.	3						
		ε	4 City			FL	85 Zip	Code	
agent. I am familiar with, and accept the	obligations of, Section 607.0505,	Florida Statu	es.						
	red agent and tide if applicable (NS AND DIRECTORS		gent signature rec	quired when reinstating) ADDITIONS/	CHANGES TO OFF	DATE	D DIRECTO	RS IN 12	
SIGNATURE Signature type-st or printed name of register  12. OFFICERS  IIILE PD	red agent and title if applicable (N	OTE Registered A	gent signature rec	guired when reinstating) ADDITIONS/	CHANGES TO OFF	DATE ICERS AN			
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AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/97

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