## 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

## DOCUMENT # P94000062655 (3)

READIN	IG ENTERPRISES, INC.					
Principal Plac	Mailing Address	g Address		a continue tià iàtil ochti duett duett duetti datil datil desti	B OSSIG TIDES STADI STADI ŠIJA (DD)	
4421 ROCK SPRINGS ROAD APOPKA FL 32712 US		525 BISON CIRCLE APOPKA FL 32712 US		DO NOT WRITE IN THIS SPACE		
					<ol> <li>Date Incorporated or Qualified 08/22/1994</li> </ol>	
	lace of Business	2a. Mailing Address	l a		4. FEI Number	Applied For
21		26			59-3267852	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		<b>6.</b> Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 7(p Country 25 29 30			y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No	
	g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registe	red Agent
READING, MICHAEL T 525 BISON CIRCLE APOPKA FL 32712				81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83		
			B	4 City		85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Florida Statute de of Florida Such change was a gations of, Section 607.0505, Flo	es, the abor authorized b orida Statute	ve-named cor by the corpora es.	poration submits this statement for the purposation's board of directors. I hereby accept the	
SIGNATURE	Signature typed or printed name of registered (	ngentand the diapphinble (NOTE	f Registered A	gent signature requ	uired when reinstating) DA	TE.
12.	OFFICERS A	IND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	☐ DELETE	1.1 TITLE			Change Addition
NAME	READING, MICHAEL T		1.2 NAME			
STREET ADDRESS	525 BISON CIRCLE		1.3 STRE	ET ADDRESS		
CFTY - ST - ZIP	APOPKA FL 32712		1.4 CITY-	ST-ZIP		
TOTO F	CT	DULLE	O 4 TITLE			Change Addition

TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETÉ ☐ Change Addition 51 TITLE TITLE NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 62 NAME 63 STREET ADDRESS STREET ADDRESS

2.2 NAME

3 1 TITLE 3.2 NAME

DELETE

DELETE

2.3 STREET ADDRESS

3.3 STREET ADDRESS

3 4. CITY-ST-ZIP

2.4 CITY-ST-ZIP

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filtro does not quaindicated on this annual report or suppliemental annual report is true and officer or director of the corporation or the receiver of touster improvere Block 12 or Block 13 if changal, or on an attriction my with an aggress. fy for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information iccurate and that my signature shall have the same legal effect as if made under oath; that I am an to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

READING, CAROLE M

**525 BISON CIRCLE** 

APOPKA FL 32712

Change

Change

Addition

Addition

**FILED** 

Feb 24 1998 8:00am

Secretary of State