## 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 # 1. Corporation Name P94000068741 (5)

CANFLOR MANAGEMENT, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 15 1998 8:00am Secretary of State



399 CAROLINA AVE. SUITE 250		399 CAROLINA AVE. SUITE 250		DO NOT WE	DITE IN THIS	SDACE		
WINTER PARK FL 32789		WINTER PARK FL 32789		3. Date Incorporated or Qualifie		- SFACE		
					09/19/1994			
	lace of Business	2a. Mailing Address	_	121	4. FEI Number		A;	pplied For
	6 W. Curport D	16 2296 Was	rport	+BIVO	59-3269083		No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		5. Certificate of Status Desired			Additional equired
City & State	<sup>6</sup> O	City & State			6. Election Campaign Financing	- 1		May Be
23 550/77	ford, M	28 Sanford	,-	۲.	Trust Fund Contribution	<b>'</b> 🗆		to Fees
Zip	Country Country	Zip	Country	SA	8. This corporation owes or has			
24 337			30 U	- J	Personal Property Tax due J			_J No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent  ADMICTROMA DEMANC 81 Name								
	MSTRONG, DENNIS A CAROLINA AVENUE SUITE 260							
399 CAROLINA AVENUE, SUITE 250 SUITE 230					ddress (P.O. Box Number is Not Accept	xable 3/	rd.	
WINTER PARK FL 32789					is w. w. por	7-51 8	<u> </u>	
	**************************************			0				
			84	San	ford	FL	.   85   Zig :	Code 7/
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the abov	e-named c	orporation submits this statement for th	A DUITODGO C	f changing it	ts registered
agent. I a	egistered agent, or sont, in the SMTe m familiar with, and accept the obliga	bit parida. Such change was au tions of, Section 607.0505, Flor	ida Statute:	y tne corpo s.	oration's board of directors. I hereby ac	cept the app	ointment as	registered
SIGNATURE	( 1/0 /					1.7.	1-98	
40	Signature, typied or printed name of regulared agon			nni signature re	equired when reinstating)	DATE		
12.	OFFICERS AND	DELETE	13. 1.1 DILE	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OF	FICERS AN	DIFFECTOR  Change	Addition S
NAME	ARMSTRONG, DENNIS		1.2 NAME					
STREET ADDRESS	399 CAROLINA AVE., STE. 250	}	1.3 STREET	ADDRESS	2296 Warpor	+ Blu	1d	
CITY-ST-ZIP	WINTER PARK FL 32789		1.4 CITY - S	ST-ZIP	2296 W Air Por Winter Park, Fr	30	フフノ	ļ
TITLE		☐ DELETE	2.1 TITLE		-		Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET	ADDRESS				
CITY-ST-ZIP	- <del></del>		2. 4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				☐ Change	Addition
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STREET ADDRESS			3.3 STREET	1				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - 5 4.1 TITLE	51-215	***		Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY - S	T-ZIP				
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
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TITLE		DELETE	6.1 TITLE				Change	Addition
NAME expret approprie			6.2 NAME	ADDDCCC				
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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 of 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 13 if changed, or on an attackment with an address.