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

	MENT # P94000 R CONCEPTS, INC.	070396 (4)			
Principal Plac	e of Business	Mailing Address		I DOGNIQUE IKO IDIRI DEBIH DOKIH DONIH QONI	
1025 S SEMORAN BLVD		1025 S SEMORAN BLVD			
1093		1093		DO NOT WRITE	INI TUUC CDAACE
WINTER PARK FL 32792		WINTER PARK FL 32792		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				10/01/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3269784	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	6	City & State			Fee Required
23	e	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	B. This corporation owes or has paid	
24	25	—¬ ´ •	30	Personal Property Tax due June	rm ' r¬ "
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
CACCIATORE, JOHN M ESQ. 81 Name				-acciatore, Joh	NM ESQ.
170 EAST WASHINGTON ST. ORLANDO FL 32801			82 Street Add	ress (P.O. Box Number is Not Acceptable Tute run film at PA	le)
			12	0 International PA	RKWAY
l			83 ST4	E. 220	,
			24 0	eathrow	FL 85 Zip Code
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flo	rida Statutes.	tion's board of directors. I hereby accep	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LANPHER, LARRY		1.2 NAME		
STREET ADDRESS	1025 S SEMORAN BLVD STE	1093	1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32792	T brieve	1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME CTREET LODGECC			2.2 NAME		1
STREET ADDRESS CITY-ST-ZIP			2 3 STREET ADDRESS 2 4 CHY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		<u> </u>	3.2 NAME		
STREET ADDRESS			3.3 STREET ADORESS		
CITY-ST-ZIP			3.4. CITY- \$1- ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-\$1-ZIP			4.4 CiTY-ST-ZiP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-7IP		1 200 500	5.4 CITY - ST - ZIP		
TALE		☐ DELETE	6.1 THLE		Change Addition

14. 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 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 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 attachment with an address.

63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

Laster LARAY LANGher

1/8/98 402679-7440

FILED

Jan 23 1998 8:00am

Secretary of State

R2E034 (10/97)