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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## P94000073520 (6)

Principal Place 2830 NORTH FO BUITE 458 WINTER PARK F	RSYTH ROAD	SUITE 458 WINTER PARK FL 32782-6	2830 NORTH FORSYTH ROAD SUITE 458 WINTER PARK FL 32782-8218			3. Date Incorporated or Qualified 3a. Date of Last Report				
US		US			10/03/19	•	антеа	3a. Date of Last R 05/01/1996	eport	
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address			er		Ar	plied For	
21 Sulte, Apt. #	Alc	Suite Ant # elc	Suite, Apt. #, etc.			59-3275171   Not Applicable				
22	, 000	<b>⊢</b>	27			5. Certificate of Status Desired Fee Required				
City & State		City & State				6. Election Campaign Financing \$5.00 May Be				
23		28				Contribution		Added		
Zip	Country 25	Zip <b>29</b>	Country 30	y	8. This corpo			ngible tax under s øs 🔲 No	. 199.032,	
24]	9. Name and Address of Curre		1301		10. Name and					
TREG	IO, ROSEMARY		81	Name _	7 4445	Ц., «	SAU	<b>.</b>		
2830	NORTH FORSYTH ROAD		82	Street Add	POSS (P.O. Box Nu	mber is Not Ad	centable)			
SUM			83	J	1830 h	), FOR	Syyh	KD.		
WINT	ER PARK FL 32792		63	1 5	DUTE 4	<i>6</i> 8	•			
			84	City 1	1	Page	đ	85 Zip	Code	
11. Pursuant to	the provisions of actions 647.05 gisterori agent, or both, in the Sta familiar with, and accept the obli	02 and 607 1508, Florida Statul	les, the abov	re-named cor	poration submits the	nis statement f	or the purp	ose of changing in	is registered	
agent. I am	familiar with, any accept the obli	gations of Station 607.0505, Fi	orida Statute	s.	ation's board or dir	ectors. Thereb	у ассері п	to appointment as	registereu •••	
SIGNATURE	بزا اللي معند	Mik 17 u 85ain			uired when reinstating)			04/07/7	/	
12.	<u> </u>	ND DIRECTORS	13.		ADDITIONS	CHANGES TO	OFFICER	S AND DIRECTOR	RS IN 12	
TITLE	D	DELFTE	1.1 7/ILE	P-F	KESIDENT	13		Change	Addition	
NAME	TREGO, ROSEMARY		1.2 NAME	2	KESIDENT ZAHIP IT 880 N.F VINTER PAR	asonin Sasinik	$\mathcal{D}_{\sim}$	HUEO		
STREET ADDRESS	109 N. DEERWOOD AVE		1.3 STREE	t address 🛭 🔏	830 1	DROY IN	K42	7708		
CITY-ST-ZIP	ORANGE FL	T pertur	1.4 CITY-	S1-7IP	NI WELL PAR	K. I FL	327	92	F3 + 788	
TITLE		DELETE	2.1 TITLE					☐ Change	L_l Addition	
NAME STREET ADDRESS			2.2 NAME	T ADDRESS						
CITY-ST-ZIP			2.4 CITY							
TITLE		DELETE	3.1 THLE	01-211				Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREE	T ADDRESS						
CITY-ST-ZIP			3.4 CITY	\$1-ZIP	<del></del>					
TITLE		☐ DELETE	4.1 TITLE					☐ Change	Addition	
NAME			4. 2 NAME		•					
STREET ADORESS				1 ADDRÉSS						
CITY-ST-ZIP TITLE		DELETE	44 DAY- 51 DALE	S1 - ZIP		·	*	Change	☐ Addition	
NAME			5.2 NAME					L.1 Change	ET VOOROII	
STREET ADDRESS			ą.	1 ADDRESS						
CITY-ST-ZIP			5.4 ¢ITY-							
TITLE		DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS			6.3 \$1REF	T ADDRESS	•					
CITY-ST-ZIP			6.4 ¢11 <b>/</b> -	\$1- <i>2</i> (P						
14. I do hereby information I am an off appears in	y certify that the information of opti indicated on this annual regist of icer or director of the corpolation Block 12 or Block 13 if charges.	ied with this filing does not qual r supplemental annual report is or the receiver or trustee empoy or on an at <b>V</b> :httent with an ad	ify for the ux true and acc vered to exe dress	emption state urate and that te this repo	ed in Section 119.0 at my signature sha ort as required by t	7(3)(i), Florida all have the sai Chapter 607, F	Statutes. I ne legal e lorida/Stat	further certify that flect as if made un ules; and that my i	the eder oath; tha name An Onle	