## 1-24-98 B 1020 C 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 # P95000019581 (4)

BUSINESS SOLUTIONS INC., OF ORLANDO

## **FILED** Jan 29 1998 8:00am Secretary of State



Principal Place	B Of Business	Mailing Address					.,
4099 FLORAL	LWOOD COURT	4099 FLORALWO					
ORLANDO FL	. 32012	ORLANDO FL 3	2812		DO NOT WRITE IN THIS	CDACE	
					3. Date Incorporated or Qualified	SFAUE	1
<b>A 5 3 3 3 3 5</b>		TAL MARKET AND A			03/08/1995	<del></del>	
	lace of Business	2a, Mailing Addre	Box 62	1317	4. FE! Number	<del></del>	ed For
21				.0011	59-3301370		pplicable
Sulte, Apt.	#, <b>e</b> tc.	Suite, Apt. #,	etc.		5. Certificate of Status Desired	\$8.75 Add	
22		27	<del> </del>			Fee Requ	
City & State	9	City & State		FL	6. Election Campaign Financing	<b>\$5.00</b> ма	
23				<u>,                                     </u>	Trust Fund Contribution L.J	Added to I	Fees
<sup>Zip</sup>	Country	Zip 2063 . 4	17/7 — C	ountry	8. This corporation owes or has paid the cu	_ ` _ `	-
24	25	29 32166.	30	ORANGE		Yes I	No.
	g, Name and Address o	Current Registered Agent		<u> </u>	10. Name and Address of New Registered	Agent	
HE	EVEY, ANDREW A			81 Name			
	99 FLORALWOOD COUR	T		82 Street Ad	idress (P.O. Box Number is Not Acceptable)		
	LANDO FL 32812	•		OI OII COI A	Alleas (F.O. Dox Hamber is Hot Acceptable)		
Ų,	CHIDO I C OLO IL			83			
				84 City	FL	85 Zip Co	de
					· · · · · · · · · · · · · · · · · · ·		
11. Pursuant t	to the provisions of Sections egistered agent, or both, in t	607.0502 and 607.1508, Florid he State of Florida, Such chand	a Statutes, the ne was authoriz	above-named cozed zed by the cozed	orporation submits this statement for the purpose or tration's board of directors. I hereby accept the ap	x changing its ri pointment as rer	egistered pistered
agent. I a	m familiar with, and accept the	he obligations of, Section 607.0	505. Florida S	tatutes.	total of all ottors ( ) holosy accept the up,	301111111111111111111111111111111111111	,
SIGNATURE							
Oldivilone.	Signature, typed or printed name of reg	istored agent and title if applicable	(NOTE Registe	ored Agent signature re	quired when reinstating) DATE		
12.	OFFIC	ERS AND DIRECTORS	13	3.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS I	N 12
TITLE	0	☐ DE	.ETE 1.1	TITLE		Change [	Addition
NAME	HEVEY, ANDREW A		1.2	? NAME			
STREET ADDRESS	4099 FLORALWOOD	COURT	1.3	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32812			I CITY - ST - ZIP			
TITLE	D	□ DEI		TITLE		Change	Addition
NAME	HEVEY, MICHELLE D		I -	NAME			
		COLIET					
STREET ADDRESS	4099 FLORALWOOD	COURT		STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32812			4 CITY - S1 - ZIP			
TITLE		☐ DE	ETE 3.1	TITLE		Change	Addition
NAME			3.2	NAME			
STREET ADDRESS			3.3	STREET ADDRESS			
Offy St.7P			3.4	. CITY-ST-ZIP			
		DEI		TITLE		Change [	Addition
NAME			4.3	2 NAME			
i				STREET ADDRESS			
STREET ADORESS		•					
CITY-ST-ZIP		The		TITLE		Change	Addition
TITLE		L. J DEC				L) Unange L	CAMICIOII
NAME				NAME			
STREET ADDRESS			5.3	STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		☐ DEL	LETE 6.1	TITLE		Change	Addition
NAME			6.2	NAME			
STREET ADDRESS			6.3	STREET ADDRESS			
CITY-ST-ZIP	^			CITY-ST-ZIP			
14 I hereby c	ertify that the information su	policed with this filing does not d	quality for the e	xemption stated	in Section 119.07(3)(i), Florida Statutes. I further co	ertify that the inf	ormation
indicated officer or o	on this annual report or sur- director of the corporation or	plemental arrival report is true the receiver of true eempow	and accurate a ered to execut	and that my signa e this report as re	ature shall have the same legal effect as if made un equired by Chapter 607, Florida Statutes; and that	nder oath; that I my name apper	am an ars in