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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

## DOCUMENT # P95000040046 (1)

2006 ALOMA CORPORATION, INC.

**SIGNATURE:** 

2000 AL	OMA COM CHAMCH	10.			
Principal Place	of Business	Mailing Address		······································	1 HORRIET HA DORT END BRIT OFFI TOM BALL DIEH OFFI ECH STRE OM REEL
1800 LEE ROAD WINTER PARK FL 32789		1800 LEE ROAD WINTER PARK FL 32789-	*		
]					3. Date incorporated or Qualified 3a. Date of Last Report 05/18/1995 07/23/1996
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
Suite, Apt	W ala	Suite, Apt. #, etc.			59-3337717   Not Applicable   \$8.75 Additional
22		27		·	5. Certificate of Status Desired Fee Required
City & State	)	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Ζιρ	Country	Zip	Country	У	8. This corporation has liability for intangible tax under s. 199.032,
24	25 9. Name and Address of Co	rrent Begistered Agent	30		Florida Statutes Yes No  10. Name and Address of New Registered Agent
DF11		nuaur nadistalan Wasur	81	Name	IV. Name Bio Address of New Adjustmed Agent
	., PERCY B LEE ROAD		62	Street Add	ress (P.O. Box Number is Not Acceptable)
	TER PARK FL 32789	,	62	Sireer Add	ress (P.O. Box Number is Not Acceptable)
			83		
			84	City	FL 85 Zip Code
office or n agent it al SiGNATURE	egistered agent, or both, in the t m familiar with, and accept the c	State of Florida. Such change was obligations of, Section 607.0505, F	authorized b lorida Statute	y the corpora is.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
12,	Stiplature, typed or printed name of register	ed agent and title it applicable. (NO SI AND DIRECTORS	TE: Registered Ag	ent signature requi	red when renstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Title	PD	DELETE	1,1 TIFLE	<u>-</u>	Change Addition
NAME	BELL, PERCY B		1,2 NAME		
STREET ADORESS	1600 LEE ROAD		1.3 STREE	T ADDRESS	
CITY ST ZIF	WINTER PARK FL		1.4 CITY -	ST-ZIP	
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		\$.*
STREET ADDRESS				T ADDRESS	,
CHY-ST-ZIP		DELETE	2. 4 CITY- 3.1 TITLE	-ST-ZIP	☐ Change ☐ Addition
NAME		Cal Peters	3.2 NAME	l	Change Cartonion
STREET ADDRESS				T ADORESS	
City+S1-ZiP			3.4 CITY	ST-ZIP	
TITLE		☐ DELETE	4.1 Trile		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS				T ADDRESS	
CITY - ST - ZIP		☐ DELETE	44 CITY-	ST-ZIP	Change Addition
TITLE NAME			5.1 TITLE 5.2 NAME		CHANGE CIANUION
STREET ADDRESS				T ADDRESS	
CITY-ST-ZiF			5.4 CITY -	<b>\</b>	
THE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREE	T ADDRESS	
CITY-S1-ZIP	·		6.4 CITY-	ST-ZIP	
informatio	by certify that the information up in indicated on this annual repo- flicer or director of the colporus in Block 12 or Block 13 if dhaya		wered to exe		od in Section 119.07(3)(i), Fiorida Statutes. I further certify that the at my signature shall have the same legal effect as if made under oath; that our as required by Chapter 607, Florida Statutes; and that my name