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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000047896 (2)

ASAP OFFICE BUILDINGS, INC.

Principal Place of Business		Mailing Address		(1001/640) (10 1818) BANK EDIKI DAKK DAKK DAKK I	81814 18881 40118 (8118 8111 4 9 81
8222 S ORANGE AVE		8222 S ORANGE AVE			
ORLANDO FL 32809		ORLANDO FL 32809		DO NOT WRITE IN TH	IC CDACE
US		US		3. Date Incorporated or Qualified	IS SPACE
İ				06/15/1995	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	:	26		59-3321406	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of oldings besides	Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	Zip 29	⊢ ′	 This corporation owes or has paid the enterprise Personal Property Tax due June 30. 	current year Intangible XYes No
-	9. Name and Address of Currer		30	10. Name and Address of New Registers	
RF	LL am y, Edna		81 Name		
	101 BELLAMY WAY		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	INTVERDE FL 34756		oz sireei Add	ress (F.O. Box (number is not Acceptable)	
			83		
			84 City		85 Zip Code
			[] - ",	F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of Section 607.0505. Florida Statules.					
SIGNATURE	Edna Bellamy	randu	any, Trus	pecond	
12,	OFFICERS AN		E Registered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	DELETE	1.1 TITLE	7.55.T.O.T.O.T.O.T.O.T.O.T.O.T.O.T.O.T.O.	Change Addition
NAME	B ELLAMY, EDNA		1.2 NAME		-
STREET ADDRESS	16101 BELLAMY WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	MONTVERDE FL 34756		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	B ELLAMY, JOHN		2.2 NAME		
STREET ADDRESS	16101 BELLAMY WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP	MONTVERDE FL 34756	Delete	2. 4 CITY - S1 - ZIP		[] 61 [] A 100
TITLE	S SDAND WINDEDLY	☐ DELETE	3.1 TITLE		Change Addition
NAME	ALBRAND, KIMBERLY 12 CARDAMON DR		3.2 NAME		
STREET ADDRESS	ORLANDO FL 32825		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	CHEANDO I E GEGES	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		<u></u>	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		

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 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 chapted, or on an attachment with an address. Dennet L Edna Challand A-12-98

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

FILED

Apr 20 1998 8:00am

Secretary of State