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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000048174 1. Corporation Name

ARIANNE CORPORATION OF ORLANDO, INC.

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Zip Country Zip		e				6. Election Campaign Financing	\$5.00	May Be
Zip Country Zip Country Zip Country S. This corporation was the current year Intangible Personal Property Tax. Ves CiNo	¬ ′		28	B .		7 1		
9. Name and Address of Current Registered Agent DESOUZA, ALEX 509 PORTLAND CIRCLE APOPKA FL 32703 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 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, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0502 and 607.1508, Florida Statutes, the above-named 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. Point as Statutes. SIGNATURE Signature, type or protect name of registered agent are little # spylindole (NOTE Registered Agent signature required when rerestating) D		l		Zip Country				
DESOUZA, ALEX 509 PORTLAND CIRCLE APOPKA FL 32703 84 City FL 85 Zip Code 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 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, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signatura, Typed or private name of registered agent are title if appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D D DELETE 11. TITLE D D D DELETE 11. TITLE D D DELETE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. APOPKA FL 32703 14. GITV-51.72P NAME STREET ADDRESS APOPKA FL 32703 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. APOPKA FL 32703 14. GITV-51.72P TITLE D D DELETE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. APOPKA FL 32703 14. GITV-51.72P TITLE D D DELETE 13. STREET ADDRESS APOPKA FL 32703 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. APOPKA FL 32703 14. GITV-51.72P TITLE D D DELETE 14. TITLE D Change Addition NAME STREET ADDRESS CITY-51.72P 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DI	24	25	29 30			. orsona. Taporty Tax		
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CITY-ST-ZIP 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 exporation or the receiver of 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 attact ment with an address, with all other like empowered.

DELETE

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Change

Addition

May 04, 1999 8:00 am Secretary of State

05-04-1999 90029 005 ***150.00

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