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

**PROFIT CORPORATION** ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc

City & State

SHITE 109

2265 LEE RD

WINTER PARK, FL

ORLANDO FL 32801

CHRISTOPHER, DONALD E 390 N. ORANGE AVE., STE. 2200



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000050437 (9)

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g. Name and Address of Current Registered Agent

MILLER EINHOUSE & ASSOCIATES, INC.

Principal Place of Business Mailing Address 250 N. ORANGE AVE., STE. 1501 250 N. ORANGE AVE.: 8TE. 1501 OFILANDO FL 32001 ORLANDO FL

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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## **FILED** Mar 19 1998 8:00am Secretary of State



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 redistered 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 femiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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Country

Name

City

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Signature typed or printed name of registered agreat and talle if applicable (NOTE Registored Agent signature required when reinstaling)  DATE  OATE					
12.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D DELETE	1.1 TITLE	DIESCIBL	Change Addition	
NAME	MILLER, H. DOUGLAS	1.2 NAME	EINHOUSE, JEFFREY D. 1563 LYONS CT JOHNH OVIEDO, PL 32765	,	
STREET ADDRESS	1631 INDIAN DANCE COURT	1.3 STREET ADORESS	1563 LYONS GT SOUTH		
CITY-ST-ZIP	MAITLAND FL 32751	1.4 CITY - ST - ZIP	OVIEDO, PL 32765		
TITLE	DELETE	2.1 TITLE		Change Addition	
NAME	Bertenis Baddety D.	2.2 NAME			
STREET ADDRESS	•	2.3 STREET ADDRESS			
CITY-ST-ZIP		2. 4 CITY - ST - ZIP			
TITLE	☐ DELETE	3.1 TITLE		Change Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	DELETE	4.1 TITLE		Change Addition	
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS		ļ.	
CITY-ST-ZIP		4.4 CITY - ST - ZIP		,	
TITLE	☐ DELETE	5.1 TITLE		Change Addition	
NAME		5.2 NAME		į	
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY - ST - ZIP		<u> </u>	
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME		6.2 NAME		•	
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 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 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 changed, or or an attachment with an address.

SIGNATURE:

4. DOUG CHE MILLER

3/11/88

407-599-4116

Zip Code

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