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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000062456 (5)

FILED Feb 11 1998 8:00am Secretary of State

1. Corporation	· · · · · ·	002430 (0)			
Principal Place	e of Business	Mailing Address		- I DECIDELI NA IDIALI DILILI DAN ADAM BONI DONI DONI D	INTO LIGHT CINEL CINE BUT IND
109 FARMERS LN. P.O. BOX 2172 VENUS FL 33960 LAKE PLACID FL 33862				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
1				08/11/1995	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	SPMC AS ABO			65-0601814	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, Sta	est of the second secon	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State	30 V	6. Election Campaign Financing	\$5,00 May Be
23	_	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the d	
24	25		30	Personal Property Tax due June 30.	Yes No.
271	g. Name and Address of Current		301	10. Name and Address of New Registere	
014			81 Name		
	ITH, ROSE, SANDRA O		\$A/	VDRA UDECL S	MITH
	FARMERS LN.		82 Street Addr	ess (P.G. Box Number is Not Acceptable)	_
Į VEI	NUS FL 33960		83 / 0 7	THENTES CAN	<u> </u>
			100	NUS . TO ADA	
			84 City	Lordy _	85 Zip Code
				<u> </u>	レーマネタムの
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered
agent 1 a	m tamiliar with, and accept the obligat	ions of, Section 607.0505, Flor	ida Statules.	ion's board or directors. Thereby accept the a	politinent as registered
SIGNATURE					ì
GIGHTATOTIC	Signature, typed or prefed name of rightered agent	and Melf applicable (NOTE:	Registered Agent signature requir	red when rainstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	L DELETE	1.1 TITLE		Change Addition
NAME	ROSE, ODELL J		12 NAME		
STREET ADDRESS	5325 LUDLOW DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	CAMP SPRINGS MD 20748-212	24	1.4 CITY - ST - ZIP]
TITLE	S	DELETE	2.1 TITLE		Change Addition
NAME	SMITH, RICHARD R		. 2.2 NAME		
STREET ADDRESS	109 FARMER'S LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	VENUS FL		2 4 CITY-ST-ZIP	* · · · · · · · · · · · · · · · · · · ·	1
TITLE	Y	DELLTE	3.1 TITLE		Change Addition
NAME	SMITH, ROSE, SANDRA O		3.2 NAME		
	109 FARMER'S LANE				
STREET ADDRESS			3.3 STREET ADDRESS		}
CITY-S1-ZIP	VENUS FL	DELETE	3.4 CITY-ST-ZIP		Change Addition
TITLE		[_] OFTER	4.1 TITLE		The cuanties The vocation
NAME			. 4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS]
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		ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP	_	I
TITLE		DELETE	6.1 TITLE		Change Addition
Name			6.2 NAME		ļ
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		1

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 early; 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 on an attachment with an address.

SIGNATURE:

Sandia Odell Smith

Feb 6, 1998

3R2E034 (10/97)