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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000087361** (8)

BONJO	OUR AND COMPANY, INC	C.				
Principal Place of Business Mailing Address						PT LOTTE LA CAND 154150 ATTENT 1544 1544
140 CHAUCER LANE NORTH LAKE MARY FL 32746 140 CHAUCER LANE NORTH LAKE MARY FL 32746					DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualified	110 0.7102
					11/13/1995	
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	Applied For
26					59-3344276	Not Applicable
Suite, Apt. #, etc. Suite, Apl. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23	3				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the	
24	9. Name and Address of Cu	29	30		Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
D/	NJOUR, RICHARD L	Item redisteled want		1 Name	10. Rame and Address of New Registe	IBD Agent
140 CHAUCER LANE NORTH LAKE MARY FL 32746				2 Street Add	from (D.O. Doy M. Imborio Not Accordable)	
			0	2 Street Add	fress (P.O. Box Number is Not Acceptable)	
			[8	3		
			l ē	4 City		85 Zip Code
					poration submits this statement for the purportion's board of directors. I hereby accept the	FL C
SIGNATURE	Signature, typed or printed name of registers			gent signature requ	wred when reinstating) DA	
TITLE	PD	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	BONJOUR, RICHARD L		1.2 NAM			
STREET ADDRESS	140 CHAUCER LANE NO	RTH		ET ADDRESS		
CITY-ST-ZIP	LAKE MARY FL 32748		1.4 City			
TITLE	VSTD	DELETE	2.1 TITLE		The state of the s	Change Addition
NAME	BONJOUR, DEBORAH L		2.2 NAM			
STREET ADDRESS	140 CHAUCER LANE NO LAKE MARY FL 32746	กก		ET ADDRESS		
CITY-ST-ZIP TITLE	DAVE MARTITE 32/40	DELETE	2. 4 CITA 3.1 TITU	'-ST-ZIP		Change Addition
NAME		EL PELLIC	3.2 NAM			— vienge — i realityt
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			3 4. CITY	-ST-ZIP		
TITLE	☐ DELETE		4.1 TITLI	1		Change Addition
NAME			4. 2 NAN			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY 5.1 TITLE			Change Addition
NAME		_ 5	5.7 NAM			
STREET ADDRESS			•	ET ADORESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 TITLE			Change Addition
			=	_ 1		

14. I hereby certify that the information supplied with this filling 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 ingreceiver 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, proning all achieves.

6.3 STREET ADDRESS

SIGNATURE.

STREET ADDRESS

Suland Busin

4-18-98 407-321-9273

FILED

Apr 29 1998 8:00am

Secretary of State