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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600004761 (8)

NETTUNO & WOOD, INC.

FILED Mar 19 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address			I FEBRAJODRA AND NOTINU OPRIA BORAL DUBLA	. 20 111 30 111 93 11	!	AUI (III IIII
		D COMMON	Ó OTE NIO					
MAITLAND FL 32751		1081 MAITLAND CENTER COMMONS STE 216 MAITLAND FL 32751						
					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifie	d		
2. Principal I	Place of Business	2a. Mailing Address	~		01/12/1996 4. FEI Number		1 14	
21		26			59-3351238		 	oplied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.						ot Applicable Additional
22		27			5. Certificate of Status Desired			equired
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
23		28		Trust Fund Contribution		Added		
Zip	Country	Zip	Coun	try	8. This corporation owes or has			_ * ;
24	9. Name and Address of Current	1 Pegistered Agent	[30]		Personal Property Tax due Ju			No
NETTUNO, J K					10. Name and Address of New	199ISTOROG A	rgent	
1061 MAITLAND CENTER COMMONS STE 218				Name	DOOD, Paul			
MAITLAND FL 32751				Street A	ddress (P.O. Box Number is Not Accep	able)	المصدد	
WATERIO LE 02/01				13	MAIHAND CENTER		(wow)	
					20			
				City	+1+1a~D	EI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	ites, the abo			e purpose of		
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 Statutes.								
SIGNATURE Signature, typed or printed name of registered agest and talled applicable. INDIE Registered Agent along time designation. INDIE Registered Agent along time designation.								
	Signature, typed or printed name of registered age:	Agent signature re	equired when reinstating)	DATE	Φ			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF			
TITLE	D NETTINO 14	DELETE	1.1 TITU			1	Change	Addition
NAME	NETTUNO, J K	MUONO OTT ALA	1.2 NAM	-				
STREET ADDRESS	1081 MAITLAND CENTER COI MAITLAND FL 32751	MMON2 21F 51R		ET ADDRESS				Į,
CITY-ST-ZIP TITLE	D MATICANO PE 32/31	DELETE		-ST-ZIP			C 05	——————————————————————————————————————
NAME	WOOD, PAUL S	L Decent	2.1 TITL				Change	Addition
STREET ADORESS	1061 MAITLAND CENTER COL	MMONS STE 216	2.2 NAM	ET ADDRESS	.:	20		
CITY-ST-ZIP	MAITLAND FL 32751			-ST-ZIP				
TITLE		DELETE	3.1 TITL				☐ Change	Addition
NAME		_	3.2 NAM			•	- Augusta	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP				-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4.2 NAM	tE				
STREET ADDRESS			4 3 STRE	ET ADDRESS				
CITY-ST-ZIP			4.4 DITY	-ST-ZIP				
TITLE		☐ DELETE	51 TITLE				Change	Addition
NAMÉ			5.2 NAM	E				
STREET ADDRESS			5.3 STAE	ET ADDRESS				.]
CITY-ST-ZIP		□ AF: Fv-	5.4 CITY					
TITLE		☐ DELETE	6.1 TITLE			Ţ	Change	Addition
NAME PROCES ADDRESS			6.2 NAM					
STREET ADDRESS				ET ADDRESS				
14. I hereby o	certify that the information supplied wit	h this bling door not quality f	6.4 CITY		in Continu 110 07/3Vi) Florida Statutos	I 6	alf Ab A ab	Jada da aka aki a

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 on an attachment with an address.

SIGNATURE

Paul as word

3-16-98

(402)460/988