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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600005498 (6)

ORLANDO BUS REALTY, INC.

FILED
Apr 21 1997 8:00am
Secretary of State

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Principa! Plac	e o' Business	Mailing A	Mailing Address				e indinage nin impre atter anter anter anter anter anter anter atter atter anter 1919; (84)				
46-PUBLIC SOI			46 PUBLIC SQUARE								
WILKES-BARRE	=		ARRE PA 18701-			j					
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX					}-			14. 6.		
MXXXXX	XBXKK&XXRXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			XX	3. Date Incorporated or Qualified 3a. Date of Last Report			нероп		
A Character and the second sec							01/17/199 4. FEI Number	0	<u> </u>		
r	2. Principal Place of Business		2a. Mailing Address			-				pplied For	
Suite, Apt. #, etc		26 239 OLD RIVER ROAD Suite, Apt. #, etc.				58-2226183 Not Applicab					
	π, ξ.(t.)						5. Certificate of	Status Desired			Additional Regulred
City & State		City & State							 		
···							6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
23 Ζιρ	Country Zip			Country		8. This corporation has liability for intangible tax under s. 199.03					
24	25	29 187	702	30	,		Florida Statu			iax under No	s. 199.032,
<u>. 5.71</u>	9. Name and Address of Curre	nt Registered	Agent	1301				Address of New Re			
TCO	RY, DAVID E			81	l Name				7		
	S ORANGE AVE										
	E 1501			82	Street	Address	s (P.O. Box Num	ber is Not Acceptab	le)		
	E 1307 ANDO FL 32801			83							
UKL	WIND LE SEON!										
				84	City				FL	85 Zip	Code
44 10 40 21	to his one deline of Contago COT OF	00 and 007 150	O. Florido Ciotad	laa sha sha	1		stan a demala thia				34
office or r	to the provisions of Sections 607.05/ eg-stered agent, or both, in the State ni familiar with, and accept the oblig	e of Florida. Suc	o, monua statut th change was a	authorized b	ve-named by the corp	poration	ition submits this 's board of direc	s statement for the paters. I hereby accep	urpose or it the appo	changing pintment a	its registered s registered
agent Fa	m fam-har with, and accept the oblig	gations of, Section	on 607.0505, Fk	orida Statute	9\$.						-
SIGNATURE	.								DATE		
12.	Supplies, typical or product name of registered ag OFTICERS, AN	ND DIRECTORS	itis; (NO)	E Registered Ap	gent aignature	required v		HANGES TO OFFIC		DIRECTO	DS IN 12
MILE	D	AD DIRECTORS	DELETE	1.1 TITLE		DDFC	SIDENT.	SECRETARY		Change	
NAME	HENRY, FRANK M		Land October	1.2 NAME		YK	EASURER	SECRETAR:	ι α ·	p onungo	
STELL LADURESS	46 PUBLIC SQUARE "			1	T ADDRESS						1
	WILKES-BARRE PA 18701					239	OLD RI	VER ROAD	0700		
OTY-S1-ZIF TULE	WEILEO-DANNE CA 16701		DELETE	1.4 CITY- 2.1 TITLE			KES-BAR		8702	Change	K Addition
			L. DELETE	1			E-PRESI			L_I Change	ALI Madillon
NAME				2 2 NAME				PLEISCOTT			
STREET ADDRESS					1 ADDRESS	239	OLD RIV	VER ROAD			
Coly St. ZiP			DELETE	2. 4 CITY	- ST- ZIP	MTT)	KES-BARI	RE, PA 1	8702	TT Chanas	- I Addison
TIREF			DELETE	31 TITLE		1				L. Change	Addition
NAME				3 2 NAME							ļ
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City-S1-20			I NO STE	3.4. CITY-	-ST-ZIP	ļ					12292
TITLE			☐ DELETE	4.1 TITLE	_					Change	Addition
NAME				4. 2 NAMI							İ
STHEET ADDRESS				4.3 STREE	T ADDRESS						
0117- \$1-7IP			T NELTE	4.4 CITY-	ST-ZIP	<u> </u>					
TOTAL			DELETE	5 1 TITLE						Change	Addition
NAME				5.2 NAME]
STEEL FALURESS				53 STREE	T ADDRESS						
CH r · S · · ZP				5 4 CiTY-	SI-ZP	ļ					
Bitt			DELETE	61 TITLE						☐ Change	Addition
NAM				6.2 NAME							
STEEL ACCURESS				6.3 STREE	T ADDRESS	1					
OI r - S* - 7IP				64 CITY-	ST-ZIP						

14. Les here by certify that the information supplies 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 on an attachment with an address.

SIGNATURE:

THE AND TYPED ON PRINTED NAME OF SIGNING OFFICE POR DIRECTOR

3/3//17 7/7 83/-3838