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

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P96000015165

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90069 050 ***150.00

Principal Place of Business 1100 W NEW HAVEN AVE W MELBOURNE FL 32904 US 1100 W NEW HAVEN AVE W MELBOURNE FL 32904 US 1100 W NEW HAVEN AVE W MELBOURNE FL 32904 US 1100 W NEW HAVEN AVE W MELBOURNE FL 32904 US 1100 W NEW HAVEN AVE WELBOURNE FL 32904 US 1100 W NEW HAVEN AVE WELBOURNE FL 32904 US 1100 W NEW HAVEN AVE WELBOURNE FL 32904 US 1100 NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/15/1996 4. FEI Number 59-3360683 IN 59-3360683 IN 59-3360683 IN 59-3360683 IN 59-3360683 IN 59-3360683 IN 59-506 Fee F 69-69 Fee F 60-69 Fee F 7111 ST Fund Contribution Added Trust Fund Contribu	LITTLE T	iger construction (CO., INC.			ļ					
2. Principal Place of Business	1100 W NEW HAVEN AVE 1100 W NEW HAVEN W MELBOURNE FL 32904 MELBOURNE FL 3290				ľE					1818 BEIGH BIN	
Sulfer ApJ. #, etc. Sulfe							·	1			
SUILO: Apt. #, etc.	— ·	ace of Business	⊢ •						\rightarrow	Applied Fo	
City & State City & State		#, etc.	 	م <u>تحد</u> د.			5. Certifcate of Status Desired			5-Additiona Required	111111111111111111111111111111111111111
Zip Country Zip Country Zip Country Single Single Country Single Single Country Single Single Country Single Cou	City & State	9	City & State						•	00 May Be ed to Fees	
GRADY, STAR E 2134 SANDALWOOD 1108 W. NEW HAVEN AVE. MELBOURNE FL 32935 11. Pursuant to the provisions of Sections 607 0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing in 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 ragent. I am familiar with, and accept the obligations of, Sections 607.0502, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as ragent. I am familiar with, and accept the obligations of, Sections 607.0505, Florida Statutes, and such change was authorized by the corporation's board of directors. I hereby accept the appointment as ragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and such change was authorized by the corporation's board of directors. I hereby accept the appointment as ragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and such change was authorized by the corporation's board of directors. I hereby accept the appointment as ragination for the purpose of changing in office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as ragination for the purpose of changing in office or registered agent, or both in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as ragination for the purpose of changing in office or registered agent, or both in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as ragination for the purpose of changing in office or registered agent, or both in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the object to such accept the object to such acc	Zip	<u> </u>	Zip		untry		•	rent year Inta		□No	
GRADY, STAR E 2134 SANDALWOOD 1108 W. NEW HAVEN AVE. MELBOURNE FL 32935 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 it office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heraby accept the appointment as a agent, I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of repulsed agent and title if applicable. (NOTE: Repulsed Agent algundare required when reinstailing) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE LEW, JOAN 11. TITLE LEW, JOAN 11. TITLE CEO DELETE 11. TITLE CEO DELETE 12. TITLE CEO DELETE 22. NAME 33. STREET ADDRESS INTO A 1A #3033 NDIALANTIC FL DELETE 31. TITLE CEO DELETE 23. TITLE CEO LEVY, PAUL R. STREET ADDRESS INTO A 1A #3033 24. STREET ADDRESS CITY-ST-2P INDIALANTIC FL DELETE 33. TITLE CHER DRAKE 11. ON NEW HAVEN AVE. WEST MELBOURNE, FL 3. 290. WEST MELBOURNE, FL 3. 290. CHANGE 13. STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-2P CHER DRAKE 11. TITLE CEO LEVY, PAUL R. STREET ADDRESS STREET ADDRESS AL CITY-ST-2P CHER DRAKE 11. OChange CHER DRAKE 11. OCHANGE 12. NAME 13. STREET ADDRESS 13. STREET ADDRESS 14. CITY-ST-2P CHER DRAKE 11. OCHANGE 12. NAME 13. STREET ADDRESS 14. CITY-ST-2P CHER DRAKE 11. OCHANGE 12. NAME 13. STREET ADDRESS 14. CITY-ST-2P CHER DRAKE 15. CITY-ST-2P CHER DRAKE 15. CITY-ST-2P CHER DRAKE 16. CITY-ST-2P CHER DRAKE 17. ST-2P CHER DRAKE 18. CITY-ST-2P CHER DRAKE 18. CITY-ST-2P CHER DRAKE 18. CITY-ST-2P CHER DRAKE 18. CITY-ST-2P CHER DRAKE 19. CITY-ST-2P CHER DRAKE 19. CITY-ST-2P		9. Name and Address of Cu	rrent Registered Agent			1	0. Name and Address of New	Registered A	gent		
2134 SANDALWOOD 1108 W. NEW HAVEN AVE. MELBOURNE FL 32935 83 84 City FL 85 Zir 87 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 if 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 a agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tas # applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-ZP TITLE OFFICERS AND DIRECTORS 14. CITY-ST-ZP TITLE CEO DELETE 11. TITLE CEO DELETE 11. TITLE CEO DELETE 12. TITLE CEO DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-ZP TITLE CEO DELETE 14. TITLE CEO DELETE 21. TITLE CEO DELETE 21. TITLE CEO DELETE 31. TITLE CHARGE CHER DERKE INDIALANTIC FL CHER DERKE INDOW NEW HAVEN AVE. WEST MELBOORNE, CITY-ST-ZP WEST MELBOORNE, CHARGE CHARGE					81 Name						
MELBOURNE FL 32935 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 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 a agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, Typed or privide name of registered agent and state if applicable. (NOTE Registered Agent signature required when remostering) DATE 12. OFFICERS AND DIRECTORS Signature, Typed or privide name of registered agent and state if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. STREET ADDRESS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS 11. STREET ADDRESS 12. ADDRESS 13. STREET ADDRESS 14. STREET ADDRESS 14. STREET ADDRESS 15. STREET ADDRESS 16. STREET ADDRESS 17. ST. ZP	2134	SANDALWOOD			l i	Address	(P.O. Box Number is Not Accept	table)			
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 if 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 a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a signal of the corporation's board of directors. I hereby accept the appointment as a statute and accept the corporation's board of directors. I hereby accept the appointment as a statute and accept the appointment as a statute. In the corporation's board of directors. I hereby accept the appointment as a statute. In the corporation's board of directors. I hereby accept the appointment as a statute. In the corporation's board of directors. I hereby accept the appointment as a statute. In the corporation's board of directors. I hereby accept the appointment as a statute. In the corporation's board of directors. I hereby accept the appointment as a statute. In the corporation's board of directors. I hereby accept the corporation's board of directors. I hereby accept			•						05 7	ip Code	_
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as a agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE	MICLE				84 City			FL	83 2	ip Code	
Signature, typed or printed name of registered agent and tible if applicable. (NOTE: Registered Agent signature requiror when releasabley) DATE									L l	ita rogistor	
12	11. Pursuant 1	egistered agent, or both, in the St	late of Florida. Such change v	was authorize	d by the cort	corporal oration's	tion submits this statement for the board of directors. I hereby acce	ept the appoin	manging tment as	registered	ed
TITLE	11. Pursuant to office or reagent. I are	egistered agent, or both, in the St m familiar with, and accept the ot	late of Florida. Such change value of Florida. Such change value of Section 607.050	was authorize 5, Florida Stat	d by the corp tutes.	oration's	board of directors, I hereby acce	ept the appoin	tment as	registered	ed
NAME LEVY, JOAN STREET ADDRESS LTY-ST-ZP INDIALANTIC FL TITLE CEO LEVY, PAUL R. STREET ADDRESS LTY-ST-ZP INDIALANTIC FL TITLE NAME STREET ADDRESS LTY-ST-ZP INDIALANTIC FL DELETE STREET ADDRESS LTY-ST-ZP INDIALANTIC FL DELETE STREET ADDRESS LTY-ST-ZP INDIALANTIC FL DELETE STREET ADDRESS STREET ADDRESS STREET ADDRESS LTY-ST-ZP TITLE NAME STREET ADDRESS LTY-ST-ZP DELETE STREET ADDRESS LTY-ST-ZP TITLE DELETE STREET ADDRESS LTY-ST-ZP DELETE STREET ADDRESS LTY-ST-ZP DELETE STREET ADDRESS LTY-ST-ZP DELETE STREET ADDRESS LTY-ST-ZP STREET ADDRESS LTY-ST-ZP DELETE STREET ADDRESS LTY-ST-ZP Change	11. Pursuant 1 office or re agent. I ar SIGNATURE	egistered agent, or both, in the St m familiar with, and accept the ot Signature, typed or printed name of registered	late of Florida. Such change voligations of, Section 607.050	was authorize 5, Florida Stat (NOTE: Registered	d by the corp tutes. d Agent signature	oration's	board of directors, I nereby acce	DATE	tment as	registered	
1177 N A1A #303	11. Pursuant to office or reagent. I ar SIGNATURE	egistered agent, or both, in the St m familiar with, and accept the of Signature, typed or printed name of registered OFFICERS	late of Florida. Such change voligations of, Section 607.050. I agent and title if applicable. AND DIRECTORS	was authorize 5, Florida Stat (NOTE: Registered 13.	d by the corp tutes.	oration's	board of directors, I nereby acce	DATE	D DIREC	TORS IN 1	2
CEO	11. Pursuant toffice or reagent. I ar SIGNATURE 12.	egistered agent, or both, in the St m familiar with, and accept the of Signature, typed or printed name of registered OFFICERS	late of Florida. Such change voligations of, Section 607.050. I agent and title if applicable. AND DIRECTORS	was authorize 5, Florida Stat (NOTE: Registered 13. TE 1.1 T	d by the corp tutes. d Agent signature	oration's	board of directors, I nereby acce	DATE	D DIREC	TORS IN 1	2
TITLE	11. Pursuant office or reagent. I ar SIGNATURE 12. TITLE NAME	egistered agent, or both, in the St m familiar with, and accept the of Signature, typed or printed name of registered OFFICERS P LEVY, JOAN	late of Florida. Such change voligations of, Section 607.050. I agent and title if applicable. AND DIRECTORS	(NOTE: Registered 13. TE 1.1 T	d by the corrected by t	required who	board of directors, I nereby acce	DATE	D DIREC	TORS IN 1	2
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE DELETE CHARGE CHARG	11. Pursuant office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the St m familiar with, and accept the of Signature, typed or printed name of registered OFFICERS P LEVY, JOAN 1177 N A1A #303	late of Florida. Such change voligations of, Section 607.050. I agent and title if applicable. AND DIRECTORS	(NOTE: Registeree 13. TE 1.1 T 1.2 N 1.3 S	d Agent signature TILE IAME STREET ADDRESS	required who	board of directors, I nereby acce	DATE	D DIREC	TORS IN 1	2
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE DELETE CHARGE CHARG	11. Pursuant office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the St m familiar with, and accept the of Signature, typed or printed name of registered OFFICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL	late of Florida. Such change valigations of, Section 607.050. I agent and title if applicable. S AND DIRECTORS DELE	(NOTE: Registered	d by the corr tutes. d Agent signature TTLE IAME STREET ADDRESS CITY-ST-ZIP	required who	board of directors, I nereby acce	DATE	D DIREC	TORS IN 1	2 dition
CITY-ST-ZIP INDIALANTIC FL	11. Pursuant office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Strandillar with, and accept the ob- Signature, typed or printed name of registered OFFICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO	late of Florida. Such change valigations of, Section 607.050. I agent and title if applicable. S AND DIRECTORS DELE	(NOTE: Registerer (NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 1.1	d by the corrected and signature TITLE IAME STREET ADDRESS CITY-ST-ZIP	required who	board of directors, I nereby acce	DATE	D DIREC	TORS IN 1	2 dition
NAME	11. Pursuant office or reagent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R.	late of Florida. Such change valigations of, Section 607.050. I agent and title if applicable. S AND DIRECTORS DELE	(NOTE: Registerer 13. TE 1.1T 1.2N 1.3 S 1.4 C TE 2.1T	d by the corr tutes. d Agent signature TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME	required who	board of directors, I nereby acce	DATE	D DIREC	TORS IN 1	2 dition
STREET ADDRESS SA CITY-ST-ZIP WEST MELBOURNE, TL 3240	11. Pursuant office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change valigations of, Section 607.050. I agent and title if applicable. S AND DIRECTORS DELE	(NOTE: Registerer 13. TE 1.1T 1.2N 1.3 S 1.4 C 2.1T 2.2 N 2.3 S	d Agent signature d Agent signature TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS	required who	board of directors, I nereby acce	DATE	D DIREC Chan	CTORS IN 1 ge Ad	2 dition
STREET ADDRESS SA CITY-ST-ZIP WEST MELBOURNE, TL 3240	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change valigations of, Section 607.050.	(NOTE: Registerer 13. TE 1.1T 12.N 13.S 14.C 2.1T 22.N 23.S 2.4.C	d by the corp tutes. d Agent signature TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP	required wh	an reinstating) ADDITIONS/CHANGES TO O	DATE FFICERS ANI	D DIREC Chan	TORS IN 1 ge Ac	2 dition
TITLE	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change valigations of, Section 607.050.	(NOTE: Registerer 13. TE 1.1T 1.2N 1.3 S 1.4 C 2.1T 2.2 N 2.3 S 2.4 4 TE 3.1T 3.2 N	d by the corr tutes. d Agent signature TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS	required wh	an reinstating) ADDITIONS/CHANGES TO O	DATE FFICERS ANI	D DIREC Chan	CTORS IN 1 ge Ad	2 dition
NAME	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change valigations of, Section 607.050.	was authorize 5, Florida Star 13, TE 1.1 TE 1.2 N 1.3 S 1.4 C 2.1 TE 2.1 TE 2.1 TE 2.1 TE 2.1 TE 3.3 S 2.4 TE 3.1 TE 3.3 S 3.3 S 3.3 S	d dy the corrections of the corr	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS ANI	D DIREC	TORS IN 1 ge □ Ac	2 dition
STREET ADDRESS 4.3 STREET ADDRESS 4.4 CTTY-ST-ZIP	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change viligations of, Section 607.050.	(NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (TE 3.1 T 3.2 N 3.3 S 3.4 (3	d Agent signature d Agent signature TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS ANI	D DIRECTOR Chan	TORS IN 1 ge □ Ac ge □ Ac	2 dition
CITY-ST-ZIP	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change viligations of, Section 607.050.	(NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 1.7 T 1.2 N 1.3 S 1.4 C 1.7 T 1.2 N 1.3 S 1.4 C 1.7 T 1.3 S 1.4 C 1.7 T 1.3 S 1.3 S 1.3 S 1.3 S 1.3 S 1.3 S 1.4 C 1.7 T 1.5 S	d dy the corrected to the street address and	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS ANI	D DIRECTOR Chan	TORS IN 1 ge □ Ac ge □ Ac	2 dition
TITLE DELETE 5.1 TITLE	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change viligations of, Section 607.050.	(NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (d dy the corp tutes. d Agent signature TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS ANI	D DIRECTOR Chan	TORS IN 1 ge □ Ac ge □ Ac	2 dition
NAME	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change viligations of, Section 607.050.	was authorize 5, Florida Stal (NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 1.1 T 4.2 T 4.2 T 4.3 S	d dy the corp tutes. d Agent signature TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS ANI	D DIRECTOR Chan	TORS IN 1 ge □ Ac ge □ Ac	2 dition
STREET ADDRESS	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change violations of, Section 607.050 if agent and title if applicable. AND DIRECTORS DELE DELE	was authorize 5, Florida Stal (NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 1.1 T 4.2 T 4.2 T 4.2 T 4.3 S 4.4 C 4.4	d dy the corrections of the corrections of the corrections of the correction of the	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS AND AVE.	DIREC Chan	TORS IN 1 ge □ Ac ge □ Ac ge □ Ac	2 dition
	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change violations of, Section 607.050 if agent and title if applicable. AND DIRECTORS DELE DELE	was authorize 5, Florida Stal (NOTE: Registerer 13. TE 1.1 T 1.2N 1.3S 1.4C TE 2.1T 22.N 2.3S 2.4(TE 3.1 T 3.2N 3.3S 3.4.(TE 4.1T 4.21 4.3S 4.4C TE 5.1 T	d by the corp tutes. d Agent signature TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS AND AVE.	DIREC Chan	TORS IN 1 ge □ Ac ge □ Ac ge □ Ac	2 dition
TITLE DELETE 6.1 TITLE Change	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change violations of, Section 607.050 if agent and title if applicable. AND DIRECTORS DELE DELE	was authorize 5, Florida Stal (NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 1.7 T 3.2 N 3.3 S 3.4 C 1.7	d by the corp tutes. d Agent signature TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS AND AVE.	DIREC Chan	TORS IN 1 ge □ Ac ge □ Ac ge □ Ac	2 dition
COMME	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	late of Florida. Such change violations of, Section 607.050 if agent and title if applicable. AND DIRECTORS DELE DELE	was authorize 5, Florida Stal (NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C T 4.1 T 4.2 C 4.3 S 4.4 C T 5.1 T 5.2 N 5.3 S	d dy the corp tutes. d Agent signature TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS AND AVE.	DIREC Chan	TORS IN 1 ge □ Ac ge □ Ac ge □ Ac	2 dition
INDITL	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	DELE	was authorize 5, Florida Stal (NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C T 4.1 T 4.2 C 4.3 S 4.4 C T 5.1 T 5.2 N 5.3 S 5.4 C	ITLE JAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE JAME STREET ADDRESS CITY-ST-ZIP	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS AND AVE.	D DIREC Chan	ge Ac	2 dition dition
CONTRET APPREC	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	DELE	was authorize 5, Florida Stal (NOTE: Registerer 13. TE 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C T 4.2 T 4.2 T 4.2 T 4.2 T 4.2 T 5.1 T 5.2 N 5.3 S 5.4 C T E 6.1 T 6.1	ITLE JAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE JAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE	required whi	ADRAKE W. NEW HAVEN	DATE FFICERS AND AVE.	D DIREC Chan	ge Ac	2 dition dition
CITY-ST-ZIP 6.4 CITY-ST-ZIP 2	11. Pursuant office or reagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the Strandillar with, and accept the observation of FICERS P LEVY, JOAN 1177 N A1A #303 INDIALANTIC FL CEO LEVY, PAUL R. 1177 N A1A #303	DELE	was authorize 5, Florida Star 13, 13	d dy the corp tutes. d Agent signature TITLE JAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME	vp CHE 1100 WE	ADRAKE W. NEW HAVEN	DATE FFICERS AND AVE.	D DIREC Chan	ge Ac	2 dition dition

I hereby certify that the information supplied with this fling 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 appeal 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 attainment with an address, with all other like empowered.

SIGNATURE:

4-8-99 407-728-4888 Date Davime Phone #