FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00								FILED				
	PROFIT FLORIDA DEPARTI					OF STATE		May 07	1999	R R-(	)()ar	n
	CORPORATION ANNUAL REPORT Secretary Secretary											11
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1998 DIVISION OF CORPORATIONS								5001000	ar y			
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1132 CASTLEWOOD TERR 5608 FOLKSTONE LANE												
SUITE #200 ORLANDO FL 32822 CASSELBERRY FL 32707								DO NOT WRIT	E IN THIS S	PACE		
US								3. Date Incorporated or Qualified				]
								03/25/1996				1
	lace of Business	D.	<u> </u>	failing Address	٠.٠٠	loods D	ا مر	4. FEI Number			plied For	-
21 <b>44</b> M Suite, Apt.	bint of Wor #, etc.	Me DL.		uite, Apt. #, etc.	1 UT V	ע פיטטטי	<b>/</b>	59-3369907		\$8.75	t Applicable	1
22	·		27	· · · · · · · · · · · · · · · · · · ·				5. Certificate of Status Desired		Fee Re		ļ
City & State	Coast	FI		Palm Co	ast	FI		<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>		\$5.00 Added t		
Zip	Cou	*	L	42	Co	untry		8. This corporation owes or has p	_			1
24 3214	9. Name and Add	15A		32164	30	<u> 154</u>		Personal Property Tax due Jun 10. Name and Address of New R			) No	┨
VA	N MIDDLESWORTH	· <del></del>	negister	eu Agent		81 Name		IQ. Haile Bild Address of New H	oğisteren F	gen		1
	88 FOLKSTONE LA	. <u>.</u>				82 Street	Addres	ss (P.O. Box Number is Not Accepte	blei			┨
	LANDO FL 02022					44	A COLOR	int of Woods Dr				Ţ
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						84 City	Pali	n Caral		85 Zip (	ode	1
11. Pursuant	to the provisions of S	ections 607.0502	and 607	.1508, Florida Sta	itutes, the a	bove-named	corpo	ration submits this statement for the	purpose of	changing its	registered	┨
office or re agent. I a	egistered agent, or b im familiar with, and a	oth, in the State o iccept the obligat	of Florida tions of, S	Such change was action 607,0505,	s authorize Florida Sya	d by the corp totes.	poratio <b>1</b>	ration submits this statement for the n's board of directors. I hereby according to the control of the control	opt the appo	intment as	registered	
SIGNATURE	desiled_	466,14.	מלעוש	.9.V dt	ン	whic \	lan I	hiddlesworth VI	<u> </u>	98		
12.	Signature, a ped or printed in	OFFICERS AND	DIRECTO	····	NOTE Registere	nd Agent signature	berluper e	when reinstating)  ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	S IN 12	16
TITLE	0	Or FOLLOWING	CALL CIT	DELETE	1.1 T	ITLE	P	TO DITIONO OF WHOLE TO OFF		Change	Addition	(10/97)
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6.2 NAME 63 STREET ADDRESS

14. Thereby 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 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.

ND

2/21/98

(9N) 427-1425

NAME

STREET ADDRESS

CIGNATURE.