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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600032978 (4)
CAPPFORD, INC.

FILED Mar 13 1998 8:00am Secretary of State

| | ORD, INC | 1 | | | | | | | | | | |
|---|------------------------|---|----------|-------------------------------|--|--|--|----------------|---|-------------------|-------------------------|-------------------------------------|
| Principal Place | e of Busines | <u> </u> | | Mailing Address | | | | | O LUMALUMA KAN RAPAN WALAN GARAL MARKA MARKA | BIOGRAPHIC HOLD H | | |
| 27520 STATE | DO SA WEST | | Р | O BOX 7001 | | | | | | | | |
| 27529 STATE RD 54 WEST WESLEY CHAPEL FL 33544 | | | | WESLEY CHAPEL FL 33543 | | | | | DO NOT WRITE IN | LTHIS SPACE | : | |
| | | | | | | | | - | 3. Date Incorporated or Qualified | 11110 01 7101 | · | |
| | | | | | | | | | 04/16/1996 | | | |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | $\neg \dagger$ | 4. FEI Number | | App | olied For |
| 21 | | | | 26 | | | | | APPLIED FOR 65-02 | 748899 | Not | Applicable |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | | | | dditional |
| 22 | | | 27 | | | | | | b. Certificate of Glatos Desired | F | ee Re | |
| City & State | | | | City & State | | | | | 6. Election Campaign Financing | | | May Be |
| 23 | | | 28 | | | | | | | | $\overline{}$ | Fees |
| | Zip Country | | - hn | | | Country | | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No | | | |
| 24 | a Name | 25 and Address of Current | 29 | etered Agent | 30 | т | | | Personal Property Tax due June 30 Name and Address of New Regis | | | 1 140 |
| | | | oyı | Provide Likelin | | 81 | Name | | Of course and comprehensive as story live | | | |
| | BER, JACO | | | | | | | | | · | | |
| | | RD 54 WEST | | | | 82 | Street A | Address | (P.O. Box Number is Not Acceptable) |) | | |
| WE | SLEY CHA | PEL FL 33544 | | | | 83 | | | | | | |
| ! | | | | | | | | | | | | |
| | | | | | | 84 | City | | | FL 85 | Zip C | ;00e |
| agent. La SIGNATURE | ım familiar w | ith, and accept the obliga | alions o | ot, Section 607,0505, I | utes, the a s authorize Florida Sta | itutes | š. | | ation submits this statement for the pur 's board of directors. I hereby accept to | | ging its ent as i | s registered registered |
| | Signature types | or printed name of registered age | | | | | | | | | | |
| | | | | | | | nt eignature r | required v | when reinstating) | DATE | CTOR | E IN 12 |
| 12. | | OFFICERS AND | | CTORS | 13. | | int elignature r | required v | when reinstating) ADDITIONS/CHANGES TO OFFICE | RS AND DIRE | | |
| 12. FITLE | D | OFFICERS AND | | | 13. 1.11 | IITLE | nt eignature r | required v | | | | S IN 12 |
| 12. TITLE NAME | D CAPPUC | OFFICERS AND | | CTORS | 13. 1.1 T 1.2 M | IITLE | | required v | | RS AND DIRE | | |
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I hereby cortify 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 informatio indicated on this annual report or supplier proteins its 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 for the precisions 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 chapted, or on your flag intention with an address.

CICMATUDE.

Joseph Connecil 1

3/9/98

(8/3)913-0718