## **FILE NOW: FILING FEE AFTER MAY 1ST**

PROFIT CORPORATION ANNUAL REPORT



Secretary of State

## Feb 16 1998 8:00am Secretary of State

•	1998	DIVISION OF COR	REPORATIONS	Scoretary of Sta	,tC	
DOCUN 1. Corporation VON PO	MENT # P96000	0033934 (6)				
Principal Place	of Business	Mailing Address				
2205 FORSYTH ROAD, SUITE B		2205 FORSYTH ROAD. SUITE 8				
ORLANDO FL 32907		ORLANDO FL 32807		DO NOT WRITE IN THIS SPACE		
l l				3. Date Incorporated or Qualified		
				04/15/1996		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$0.75 Addit		
22		27		5. Certificate of Status Desired Fee Regula		
City & State		City & State		6. Election Campaign Financing \$5.00 May	y Be	
23		28		Trust Fund Contribution	ees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangi		
24	25 Same and Address of Curre	29 30	<u> </u>	Personal Property Tax due June 30. Yes  10. Name and Address of New Registered Agent	5	
B1 Name						
FEUVREL, SIDNEY L JR. 1520 E. LIVINGSTON STREET			20 00-11	ROQNEY PORC ddress (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32803				dress (P.O. Box Number is Not Acceptable)		
J	54100 TE 02000		83			
	•		84 City	85 Zip Cod		
				101 AUM	タフ	
11. Pursuant t	o the provisions of Sections 607.05	orporation submits this statement for the purpose of changing its re ration's board of directors. I hereby accept the appointment as regi	gistered   istered			
ageri∖≠ <del>l a</del> i	in familiar with, and account the oblig	gasions of Section 607.0505, Etonic	ia Statutes.	2/9/00		
SIGNATURE	Signature, typed or preded high, of registered as	1 1	togistered Agent signature re	SiDELLS  poured when reinstating)  DATE		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	D	DLLETE	1.1 TITLE	TRUE Change	Addition	
NAME	PORR, RODNEY		1.2 NAME			
STREET ADDRESS	2424 PEARTREE CT.		1.3 STREET ADDRESS		.	
CITY - ST - ZIP	ORLANDO FL 32807		1.4 CITY - ST - ZIP	Change	Addition	
TITLE		C DELETE	2 1 TITLE	Citalige	7 Vagueou	
NAME			2.2 NAME 2.3 STREET ADDRESS			
STREET ADDRESS			2 4 Lity-SI-ZIP			
CITY-ST-71P TITLE		DELETE	3.1 TLE	Change _	Addition	
NAME			3.2 AME			
STREET ADDRESS			3.3 REET ADDRESS			
CITY-ST-ZIP			3.4 ITY-ST-ZIP		1	
TITLE		☐ DELETE	4.1. 'LE	Change L	Addition	
RAME			4. 2 AME			
STREET ADDRESS			4.3 REET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 FTY+ST-ZIP 5.1 TLF	Change	Addition	
NAME			5.2 IAME	· -		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE	Change L	Addition	

6.4 CITY-ST-ZIP CRY-ST-ZIP 14. 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 information indicated on this annual report or supplemental armore coordinate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the comporation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, (r ex) an affact intent with) in address.

6.2 NAME 6.3 STREET ADDRESS

STREET ADDRESS