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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000037987 (0)

KARNA BANCHES INC

FILED

Apr 23 1998 8:00am

Secretary of State

IVADIWA	nanones, inc.				I IRANGRAL NA NRINK ROM RANG ARNA ARNA ARNA	# 4000 1840 1840 1841 1881 1881
Principal flica	of Duranae	Madaya Address				.B. 11411 14014 1014 1014 1101 1101 1101
Principal Place of Business		Mailing Address				
806 EAST 25TH STREET SAMFORD FL 32771		806 EAST 25TH STREE SANFORD FL 32771	ž I			
					DO NOT WRITE IN TH	HIS SPACE.
					3. Date Incorporated or Qualified	
9 Denominal Di	ace of Business	2a. Mailing Address			04/29/1996 4. FEI Number	
	ace or nasiness	1 · 1				Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.			59-3374249	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stale	•	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the	
24	25	[29]	[30]		Personal Property Tax due June 30.	Yes X No
<u> </u>	9. Name and Address of Curren	it negistered Agent		Name	10. Name and Address of New Register	eo Agent
	NDEFUR, STANLEY H		[.	INATILE		
	BEAST 25TH STREET NFORD FL 32771		[•	32 Street Add	dress (P.O. Box Number is Not Acceptable)	
SAI	APONU PL 32// I		- -	33		
			[1	City		85 Zip Code
11. Pursuant to	o the provisions of Sections 607.050	2 and 607 1508. Florida Stat	rutes, the abi	 ove-named cor	poration submits this statement for the purpos	e of changing its registered
office or re	egistered agent, or both, in the State ii familiar with, and accept the obliga	of Florida, Such change wa	s authorized	by the corpora	ation's board of directors. I hereby accept the	appointment as registered
	ir mirmar wari, and accept the oring.	tions of, account 607 (1905)	i kunda Statu	165.		
SIGNATURE	Stipontare Appred en provinch review of englishmed voye	of and title if applie above (N	OTE Registered	Agent signature requ	ared when reinstating) DAT	i
12.	OFFICERS AND) DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PSTD	DECETE	1 1 Titt	F		Change Addition
NAME	SANDEFUR, STANLEY H Y		1.2 NAN	4E		
STREET ADDRESS	806 EAST 25TH STREET		13 STR	EET ADDRESS		
CITY-ST-7IP	SANFORD FL 32771			/-ST-7IP	· · · · · · · · · · · · · · · · · · ·	
TITLE		L. DELETE	2 1 1IIL			Change Addition
NAME			2.2 NAN			
STREET ADDRESS				EET ADDRESS	•	
TITLE		□ OFLETE	2. 4 CII 3.1 TIIL	Y ST-ZIP		Change Addition
NAME			3.2 NAN			builde radicol
STREET ADDRESS				EET ADDRESS		
CITY-SI-ZIP				Y-\$1-ZIP		
TILE		DELETE	41 JiTL			Change Addition
NAME			4 2 NA			
STREFT ADDRESS			43 STR	EE I ADDRESS		
CITY-ST ZIP				· ST · ZIP		
TIJLE		☐ DELFTE	5 1 7171	+		Change Addition
NAME			52 NAM	te		
STREET ADDRESS			5.3 S1RI	EET ADDRESS		
CITY-ST-ZIP			5.4 CITY	'- ST - ZIP		
TITLE		DELETE	6 1 TITL	f T		☐ Change ☐ Addition
NAME			6.2 NAM	16		
STREET ADDRESS			6.3 STRI	ET ADDRESS		
DITY-ST-ZIP			64 CHY	- ST-7IP		

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 suppliemental innual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 affacting of our managed or on a contracting of our managed or on an affacting of our managed or on a contracting of our managed or on a contracting of our managed or on a contracting or on the contracting of our managed or on a contracting of our managed or on a contracting or

SIGNATURE:

4/16/98

(407)321-8200