SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTAYE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000063172 (6)

DANIEL OSBORNE, INC.

SIGNATURE:

1997

APPROVED AND FILED

1997 OCT -2 AM 2: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Plac	of Business	Mailing Address							
6480 ROCKAY ORLANDO FL	WAY ST	Mailing Address 6460 ROCKAWAY ST ORLANDO FL 32607			DO NOT WRITE	PIHT IN	SPACE		
					· · · · · · · · · · · · · · · · · · ·	3. Date Incorporated or Qualified 07/26/1996		ate of Last R	eport
2. Principal P	Plac e of B usiness	2a, Mailing Address				4. FEI Number 5 90770			oplied For of Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & Stat	Θ	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip 24	Country 25	Zip 29	Cour	ntry		This corporation owes or has pa Personal Property Tax due June	-	rrent year Int	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re		Agent	
08	BORNE, DANIEL D			81	Name	•			
6460 ROCKAWAY ST					Street Add	ress (P.O. Box Number is Not Acceptat	<u>ələ)</u>		
	LANDO FL 32807		82 Street A			Today, Total Control of Not			
			[83					
			ţ	64	City	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508. Florida Statut	es, the ab		named cor	poration submits this statement for the p	ourpose of	f changing it	s registered
office or r	registered agent, or both, in the State of the familiar with, and accept the obligation	of Florida. Such change was a	authorized	d by I	the corpora	ition's board of directors. I hereby accept	at the app	cintment as	registered
	an in the man with, and accept the obliga	nons of, decitor der lodge, Th	DIQU GUU	ulto.	•				
SIGNATURE	Signature, typed or printed name of registered agon	t and title II applicable. (NOT	L Registered	Agen	t signature requ	ired when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		IS IN 12
TITLE	/ _ · · · ·		1.5 Tit	í LE	}		-	Change	Addition
NAME	DANIEL ()SBORNE			ME]				
STREET ADDRESS				1.3 STREET ADDRESS					
City-ST-ZIP	URC, FC 34807			TY-ST-	-ZIP				
TITLE		☐ DELETE	2.1 โก้		}			Change	Addition
NAME			2.2 NAJ)	2000023 -10/0 <u>6</u> /	312	512	1
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NAME Profes Address			3.2 NA		IDDDECC				
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NAME		<u>[]</u>	4. 2 NA		1			Chango	
STREET ADDRESS					ADDRESS				
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STREET ADDRESS					NDDRESS				\wedge
CITY-ST-ZIP			5.4 CIT		ł				$\lambda l \wedge$
TITLE		DELETE	6.1 TIT					Chang	3dd lion
NAME			6.2 NA	ME	Ì			~\V\	WV,
STREET ADDRESS			6.3 ST	REET A	ODRESS			77	אוויי
CITY-ST-ZIP			6.4 C/T	IY-51-	- ZIP				-
14, 1 do herel	by certify that the information supplied on indicated on this annual report or su	with this filing does not quality	fy for the crue and a	exer	plion state	d in Section 119.07(3)(i), Florida Statute to my signature shall have the same lens	s. I further	r certify that t	the
l am an o appears i	fficer or director of the corporation or t in Block 12 or Block 13 if changed, or	he receder or trustee empow on an itachment with an add	ered to e	x cu	ite this repo	d in Section 119.07(3)(i), Florida Statute it my signature shall have the same lega rt as required by Chapter 607, Florida S	itatutes; a	nd that my n	iamo