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 # P9600065466 (0)

GIFTWARE NORTH AMERICA, INC.

FILED Feb 12 1998 8:00am Secretary of State



Principal Plac	e of Businoss	Mailing Address					
'	AKE PLEASANT ROAD	P.O. BOX 1002 APOPKA FL 32704 US		DO NOT WRITE IN T	HIS SPACE		
		•			3. Date Incorporated or Qualified 08/06/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21		26			59-3397177	N	lot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		[27]			8. Certificate of Status Desired	Fee R	equired
City & Stal	О	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
	Zip Country		Zφ Country		8. This corporation owes or has paid the current year Intangible		
24	25 29 9. Name and Address of Current Registered Agent		[30]		Personal Property Tax due June 30.		No
		t Hegistered Agent		81 Name	10. Name and Address of New Registe	rea Agent	
	VILL, GLEN P			B1 Name			
206 NORTH LAKE PLEASANT ROAD				82 Street A	ddress (P.O. Box Number is Not Acceptable)		
AP(OPKA FL 32703		-				
				83			-
			}	B4 City		85 Zip	Code
						FL	
SIGNATURE	Signature, typod or profed name of registered age	ral and the diapper state. (Ne			corporation submits this statement for the purpo pration's board of directors. I hereby accept the equired when reinstating)	TE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	DELETE	1.4 TIT	.E		Change	Addition
NAME	SAVILL, GLEN P		1.2 NAI	ME			
STREET ADDRESS	4355 GOLDEN GEM ROAD		1.3 STF	EET ADDRESS			
CITY-ST-ZIP	APOPKA FL 32712		1.4 C(T	Y-ST-ZIP			
TIFLE	D	☐ DELETE	2 1 TIT	.E		Change	Addition
NAME	NELSON, BRYAN F		2 2 NA	AE .			
STREET ADDRESS	1157 OAK POINT CIRCLE		2.3 STF	EET ADDRESS			
CITY-ST-ZIP	APOPKA FL 32712		2 4 01	Y-ST-ZIP			
TITLE	D	☐ DELETE	3 1 TH	.F		☐ Change	Addition
NAME	NELSON, DEBRA H		3 2 NA	AE .			
STREET ADDRESS	1157 OAK POINT CIRCLE		3.3 STF	EET ADDRESS			
CITY+ST-ZIP	APOPKA FL 32712	5	3 4. CI	Y - ST - ZIP			
TITLE		DELFTE	4 1 181	.£		☐ Change	Addition
NAME			4 2 NA	ME			
STREET ADDRESS			4.3 STF	EET ADDRESS			
CITY - ST - ZIP			4 4 CIT	Y-S1-ZIP			
TITLE		DELETE	51 TITI	.f		Change	Addition
NAME			5 2 NA	AE			
STREET ADDRESS			5.3 STR	EET ADDRESS			,
CITY - ST - ZIP			5.4 CIT	Y-ST-ZIP			
TITLE		DELETE	61 TITI			Change	☐ Addition
NAME			6.2 NA	AE .			
STREET ADDRESS			6 3 STF	EET ADDRESS			į
CITY-ST-ZIP			6.4 CiT	Y-ST-ZIP			

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 receiver or trusted 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.

401-886-7553