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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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FILED Apr 14, 1999 8:00 am Secretary of State

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DOCUMENT	#	P96000072479
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1. Corporation Name

ORE MODE HOMES, INC. a PRESTIGE VACATION HOMES, INC.

Principal Place of Business

P.O. Box 747

Loughman, FL 33858

Mailing Address P.O. Box 747

Loughman, FL 33858

Houghman, 12 33030				
5 .	-		3. Date Incorporated or Qualifed	
			08/30/96	
2. Principal Place of Business	2a. Mailing Address			pplied For
101 Thousand Oaks Blvd.	26 101 Thousand Oak	s B	59 - 343-6689	ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$8.75	Additional equired
City & State	City & State 28 Davenport, Flori	da	1	May Be to Fees
Davenport, Florida Zip Country	Zip Cou	intry USA	This corporation owes the current year Intangible Personal Property Tax. XXXVes	□No
1 33837 25 USA 9. Name and Address of Current	1 30 37	<u> </u>	10. Name and Address of New Registered Agent	
Patel, Bhaskar M.	Kagiotorea Agent		Name Joseph G. Kern	
7807 Turkey Oak Lane		82	Street Address (P.O. Box Number is Not Acceptable) 215 North Eola Drive	
Kissimmee, FL 34747		83		
		84	City Orlando, FL 85 Zip 328	Code 301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or being the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and recept the obligations of, Section 607.0505, Florida Statutes. Joseph G. Kern (NOTE: Registered Agent signature required when reinstating) ed agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. XX DELETE ☐ Change XXXAddition 1.1 TITLE P/T/S/D STD tine 1,2 NAME Novik, Guy NAME Patel, Suki 1.3 STREET ADDRESS 1 Raven Road STREET ADDRESS 71 Cherry Court, Acorn Walk: London, ENGLAND E18 THD 14 CITY-ST-ZIP London, ENGLAND S-E-16-LET CITY-ST-ZIP Change Addition XX DELETE 2.1 TITLE an e DP 22 NAME NAME Patel, Parimal K. 2.3 STREET ADDRESS 71 Cherry Court, Acorn Walk_ London, ENGLAND S-E-16-1ET STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change XX DELETE 3.1 TITLE STILE 32 NAME Patel, Bhaskar M. NAME 3.3 STREET ADDRESS STREET ADDRESS 7807 Turkey Oak Lane 3.4. CITY-ST-ZIP Kissimmee, FL 34747 CITY-ST-ZIP Addition Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP 'ATY-ST-ZIP Addition DELETE 5.1 TITLE TITLE 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP 377-37-ZP Addition Change ô.1 TITLE ☐ DELETE TITLE 5.2 NAME MAME 6.3 STREET ADDRESS TREET ADDRESS 5.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

GUY NOVIK, President/Director

011-44-181-5597798

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