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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000083863 (6)

Principal Place of Business  12240 - 69TH TERRACE NORTH SEMINOLE FL 33772  12240 - 69TH TERRACE NORTH SEMINOLE FL 33772  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 10/07/1996  2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applied be Suite, Apt. #, etc. 27  City & State City & State City & State City & State  Zip Country  Applied For Not Applied For Suite, Apt. #, etc. 6. Certificate of Status Desired Trust Fund Contribution Added to Fees  Zip Country  Zip Country  8. This corporation owes or has paid the current year Integrible		OM 21, INC.					
SEMINOLE FL 33772  SEMINOLE FL 33772  SEMINOLE FL 33772  SEMINOLE FL 33772  2e	Principal Plac	e of Business	Mailing Address			* ************************************	
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Application   Application   Suite, Apt. #, etc.   59-3403006   Not Application   Not							
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Application   Application   Suite, Apt. #, etc.   59-3403006   Not Application   Not	•					10/07/1996	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   City & State   City &	2. Principal P	lace of Business	2a. Mailing Address				
City & State  Ci	21		26			<b>59-3403006</b> Not Applicable	
City & State  Country  Country  Sepan Lamb Contribution  Description in Comparing Financing  Personal Property Tax due June 30.	—	#, etc.				E Continents of Status Design	
Zip							
Country   Zip   Country   Zip   Country   Zip   Country   St. This corporation owes or has paid the current year Integrable Personal Property Tax due June 30.   Yes   Zip No		<del>o</del>	├ <b></b> ¬ ′			, , , , , , , , , , , , , , , , , , ,	
9. Name and Address of Current Registered Agent  UNDERWOOD, GLENN E 12240 - 69TH TERRACE NORTH SEMINOLE FL 33772  83  84 City  FL 85 Zirp Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statules, the above named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statules, the above named corporation's board of directors. I hereby accept the appointment as registered signed. I am femilier with, and accept the obligations of, Section 607 0505, Florida Statules.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  12. OFFICERS AND DIRECTORS  13. SIRRET ADDRESS  CITY-ST-2IP  14. CITY-ST-2IP  15. SEMINOLE FL  16. Change  17. Change  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. Lange Statistical Change Addition  11. SIRRET ADDRESS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. SIRRET ADDRESS  14. CITY-ST-2IP  14. CITY-ST-2IP  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change Addition  17. Change Addition  18. Change Statistical Change Addition  18. Change Addition  18. Change Statistical Change Statistical Change		Country	<del>-  </del>	Cour	ntry		
UNDERWOOD, GLENN E 12240 - 89TH TERRACE NORTH SEMINOLE FL 33772  83  84 City  FL 85 Zip Code  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 agent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in this state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered spent amount of registered agent are the if applicable  SIGNATURE  Signature, hyperior prefer in amount of registered agent are the if applicable  UNDERWOOD, GLEEE E.  12 AME  UNDERWOOD, GLEEE E.  12 AME  13 STREET ADDRESS  CITY-ST-2IP  UNDERWOOD, GLEEE E.  12 AME  23 SIRET ADDRESS  CITY-ST-2IP  DELETE  DELETE  DELETE  DELETE  34 Addition  Addition  NAME  STREET ADDRESS  CITY-ST-2IP  DELETE  DELETE  Addition  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-2IP  DELETE  DELETE  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  AME  STREET ADDRESS  CITY-ST-2IP  DELETE  DELETE  Addition  Addition  AME  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  AME  STREET ADDRESS  CITY-ST-2IP  DELETE  ADDRESS  ACTITY-ST-2IP  DELETE  ADDRESS  ACTITY-ST-2IP  ADDRESS  AC	24	25	29	30	-		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ITILE  PUNDERWOOD, GLEEE E.  12. OFFICERS AND DIRECTORS  15. STREET ADDRESS  16. STREET ADDRESS  17. ST. 2P  SEMINOLE FL  12. OFFICERS NO DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LA CITY-ST-2P  UNDERWOOD, GLEEE E.  12. AME  13. STREET ADDRESS  14. CITY-ST-2P  SEMINOLE FL  15. TITLE  PUNDERWOOD, GLEEN E.  12. NAME  13. STREET ADDRESS  14. CITY-ST-2P  15. SEMINOLE FL  15. TITLE  NAME  15. SEMINOLE FL  15. TITLE  15. TITLE  15. SEMINOLE FL  15. TITLE  15. TITLE  15. TITLE  15. SEMINOLE FL  15. TITLE  15. SEMINOLE FL  15. TITLE  15.		g. Name and Address of Currer	t Registered Agent			10. Name and Address of New Registered Agent	
SEMINOLE FL 33772    83	UN	IDERWOOD, GLENN E			81 Name		
B3   B4   City   FL   B5   Zip Code	12	12240 - 69TH TERRACE NORTH			82 Street	Address (P.O. Box Number is Not Acceptable)	
### City   FL   85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Fiorida Statutes.  SIGNATURE    Signature, typed or prelian name of registered agent and title if explicable   (NOTE Registered Agent signature required when refinizating)   DATE	SE						
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, lypud or printed name of registered agent and life if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE				1	83		
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 both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or pretion name of registered agent and life if applicable of the purpose of changing its registered agent agent and life if applicable on the provision of the purpose of changing its registered agent agent and life if applicable on the purpose of changing its registered agent agent and life if applicable on the purpose of changing its registered agent agent and life if applicable on the purpose of changing its registered agent agent and life if applicable on the purpose of changing its registered agent agent and life if applicable on the purpose of change is agent. I are the purpose of changing its registered agent agent and life if applicable on the purpose of changing its registered agent agent and life if applicable on the purpose of changing its registered agent agent and life if applicable on the purpose of changing its registered agent agent and life if applicable on the purpose of change is agent. In the purpose of change is agent. In the purpose of changing its registered agent a				1	84 City	85 Zip Code	
Addition NAME  STREET ADDRESS STREET	11 2 2	10 de	0 - nd 007 1000 Fire de Otet de			• <del>-</del>   ;	
SIGNATURE   Signature, typied or printed name of registered agent and life if applicable   (NOTE Registered Agent signature required when reinstating)   DATE	office or r	egistered agent, or both, in the State	of Florida, Such change was a	es, the ab outhorized	ove-named by the corp	poration's board of directors. I hereby accept the appointment as registered	
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   TITLE   P	~	m familiar with, and accept the obliga-	ations of, Section 607.0505, Flo	rida Statu	ites.		
12. OFFICERS AND DIRECTORS  TITLE  NAME  UNDERWOOD, GLEEE E.  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DEL	SIGNATURE	Storeture, typed or puried pame of registered age	or and title if applicable (NOTE	- Begistered	Agent signature	e required when reinstaling) DATE	
TITLE   P	12.			_			
1.3 STREET ADDRESS   1.2240 69 TERR NO   1.3 STREET ADDRESS   1.2240 69 TERR ACE NORTH	TITLE	P	DELETE	1.1 111	.E	P	
Addition   City-st-zip   SEMINOLE FL   33772 ~ 6626   SEMINOLE FL   SEMINOLE FL   SEMINOLE FL   STREET ADDRESS   STREET ADDRES	NAME	UNDERWOOD, GLEEE E.		1.2 NAM	ИÉ	UNDERWOOD, GLENN E. CORRECTION	
TITLE         DELETE         2.1 TITLE         Change         Addition           NAME         22 NAME	STREET ADDRESS	REET ADDRESS 12240 69 TERR NO		1.3 STR	EET ADDRESS		
NAME	CITY-ST-ZIP	SEMINOLE FL		1.4 CIT	Y-ST-ZIP		
2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   2.4 CITY-ST-ZIP   Change   Addition     NAME	TITLE		☐ DELETE	2.1 TITU	.Е	☐ Change ☐ Addition	
2.4 CITY-ST-ZIP	NAME			2.2 NAI	VE )		
TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         3.2 NAME         STREET ADDRESS         CITY-ST-ZIP         3.4 CITY-ST-ZIP         TITLE         Change         Addition           NAME         1.1 TITLE         Change         Addition           NAME         4.2 NAME         Addition	STREET ADDRESS			1			
NAME			T acter				
STREET ADDRESS	''		☐ DETEIF			Change Addition	
CITY-ST-ZIP         3.4. CITY-ST-ZIP           TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME	!						
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NAME 4.2 NAME		<del>-</del>	I DELETE			Change Addition	
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SINCE INVINION OF THE CONTROL OF THE	1						
City-St-ZiP 10	!			1	i	<b>★</b> 27	

CITY-ST-ZIP 14. I hereby 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 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.

SIGNATURE:

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY - ST-ZIP

NAME

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

DELETE

DELETE

Change

Change

Addition

Addition

**FILED** 

Mar 10 1998 8:00am

Secretary of State