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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000083930 (3)

FILED Apr 08 1998 8:00am Secretary of State

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|---|--|--|---|--|-----------------|---|-------------|---------------------------------|--|
| Principal Place of Business Mailing Address COLO CALIFANIA AUG. COLO CALIFANIA AUG. | | | | | | | | | |
| 2847 SANTANA AYE ORLANDO FL 32811 | | 2847 SANTANA AVE ORLANDO FL 32811 | 2847 SANTANA AYE ORLANDO FL 32811 | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | 3. Date Incorporated or Qualified | 1 | | |
| | | | | | | 10/08/1996 | | | |
| | ace of Business | 2a. Mailing Address | | | | 4. FEI Number | | | pplied For |
| 21 | H -1- | 26 Suite Ant # sto | | | | <u>59-3421692</u> | | | ot Applicable Additional |
| Suite, Apt. | #, ΘIC. | Suite, Apt. #, etc. | | | - 1 | 5. Certificate of Status Desired | | | Additional equired |
| 22 City & State | 5 | City & State | | | | 6. Election Campaign Financing | | | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | X | | to Fees |
| Zip | Country | Zip | Cou | untry | | 8. This corporation owes or has | paid the cu | urrent year In | itangible |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due Ju | | | ⊉ № |
| | 9. Name and Address of Curr | ent Registered Agent | | I | | 10. Name and Address of New | Registered | l Agent | |
| НА | TCHER, MARY | | | 81 Name | e | | | | |
| | 47 SANTANA AVE | | | 82 Stree | t Address | s (P.O. Box Number is Not Accept | able) | | |
| OR | RLANDO FL 32811 | | | | | | | | |
| | | | | 83 | | | | | |
| | | | | 84 City | | | | 85 Zip | Code |
| | to the provisions of Sections 607.0 | | | 1 1 ' | | | FI | | |
| | 111001 110-11 | Lee Man | Florida Sta | lules | بر (| s board of directors. I hereby acc | 3/3 | 0/98 | |
| SIGNATURE . | Signature, typics for pointed colored of registered. OF FICERS F | ADD DIRECTORS | Olit Registere | ed Agent signatu | , , | when reinstaling) ADDITIONS/CHANGES TO OF | DATE | 0/9 & ID DIRECTO | RS IN 12 |
| SIGNATURE , | Signature type of position of an incidence of OFFICERS A | held May | Olf Registere 13. | ed Agent signatu | , , | MCSELECTION WHEN reinstalling) | DATE | 998 | RS IN 12 |
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I. 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 informatio 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 programmed by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: COKAISS GATINES

Deines Dresident 3/30/98 407-839-3449 CR2E034 (10/97