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 # P96000090071 (7)

FILED Apr 22 1998 8:00am Secretary of State



				<u> </u>	
1 '	e of Business	Mailing Address			aitt Batti Adtit idadt tille idle
11673 JUREANE DRIVE 11673 JUREANE DRIVE					
ORLANDO F	L 32650	ORLANDO FL 32836		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
				10/30/1996	,
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3439962	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		C. Communication States Desired	Fee Required
City & Stat	Ю	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	<u>}-</u> ¬ ⊢	o Couring	 This corporation owes or has paid the corporation owes or has paid the corporation. Personal Property Tax due June 30. 	urrent year Intangible ☑ Yes ☑ No
241	9. Name and Address of Curre	nt Registered Agent	1	10, Name and Address of New Registered	
			81 Name 1 / T / (T 0 / / / D T / / / D		
	1673 JUREANE DR.	ARTHYR	99 9 9 9 9 9 9	NINSIUN, AKII	7 U K
	RLANDO FL 32836		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
1			83		
				same	
			84 City	same 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 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					
office or r	re gistere d agent, or both, in the State I m fam iliar with, and accept the oblig	t of Florida. Such change was au jations of, Section 607.0505, Flori	thorized by the corporat da Statutes.	tion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE					
	Signature, typed or pointed name of registered ag-		Registered Agent signature requi		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D CHERTAL C	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WINSTON, CHRISTINA S 11673 JUREANE DRIVE		1.2 NAME		
STREET ADDRESS	ORLANDO FL 32836		1.3 STREET ADDRESS		
CITY-ST-ZIP	DA DA	™ DELETE	1.4 CHY-ST-ZIP 2.1 TITLE		Change Addition
NAME	MANJI, JALAL	E DECEIL	2.2 NAME		Cuarite C vontion
STREET ADDRESS	869 CYNTHIANNA CIR		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	41 THILE		Change Addition
NAME	•		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	<u></u>		6.4 CITY-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 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.