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

PROFIT **CORPORATION ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 06 1998 8:00am Secretary of State

1. Corporation	TRANSF	10700	00007	797 (5)					
Principal Plac	e of Busines	SS .	Mailing	Mailing Address					
2457-A, STE. 130, S. HIAWASSEE RD. ORLANDO FL 32635				2457-A, STE. 130. S. HIAWASSEE RD. ORLANDO FL 32835				DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
2. Principal P	lace of Duc	noco	On Ma	ling Address			<del></del> -	01/06/1997	
21 THICIPALE	IACE OF BUSI	11055	<del>-</del>	2a. Mailing Address				4. FEI Number   Applied For   Not Applicable	
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				SR 75 Additional	
22			27	27				5. Certificate of Status Desired Fee Required	
City & Stat	0		City	City & State				Election Campaign Financing \$5.00 May Be	
23		<u> </u>	28	) — · · · · · · · · · · · · · · · · · ·				Trust Fund Contribution Added to Fees	
Zip		Country	Zip		Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	25 25 27 27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20		nt Registered					Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
PAI	RKS, WAYI					81	Name		
2457-A, STE. 130, S. HIAWASSEE RD.			RD.			92	Street Ad	Address (P.O. Box Number is Not Acceptable)	
	LANDO FL		••••			-	Oliegi Ad	iduless (1.0, box idulige) is not ricoptable)	
• · · · · · · · · · · · · · · · · · · ·									
							City	FL 85 Zip Code	
11. Pursuant	to the provis	sions of Sections 607.05	02 and 607.15	508, Florida Statu	ites, the ab	ove	named co	corporation submits this statement for the purpose of changing its registered to the polynomial or all or a polynomials as registered to a polynomial or a pol	
agent. La	ı <b>m la</b> miliar w	ith, and accept the obliq	gations of, Sec	otion 607.0505, F	lorida Statu	ites	i	Oranon's board of directors. Thereby accept the appointment as registered	
SIGNATURE	Mor	mos Jour	<b>—</b>		WF	<u> </u>	INE	E. PAYKS, Pres 4-14-98	
12.	Signature, types		rent and tale 1 appr VD DIRECTOR		13.	Ager	nt signature req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	PRES,		DELETE		1.1 TITLE		Change Addition	
NAME	A A MARIA MA			1.2 NAME			()		
STREET ADORESS	TREET ADDRESS 1004 NIN ST.			1 3 STREET			ADDRESS		
CITY-ST-ZIP							T · ZIP		
TITLE	D	2 0 1 7		2.1 TITL	2.1 TITLE		Change Addition		
NAME	PARKS, DONNA M			2.2		νE	1		
STREET ADDRESS	1 100 1 11111 1 1						ADDRESS		
CITY-ST-ZIP	P ORLANDO FL 32835-5131						T- ZIP	Change Addition	
TITLE NAME	I DETERE		3.1 TITL	3.2 NAME		Cutange C Adoution			
STREET ADDRESS							ADDRESS		
	CITY-ST-ZIP			3.4. CI					
TITLE	· · · · · · · · · · · · · · · · · · ·			0.0		4.1 TITLE		Change Addition	
NAME	NAME			4.2		ME			
STREET ADDRESS	STREET ADDRESS			4.3 STI		EET A	ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y - ST	I - ZIP				
TITLE	☐ DELETE 5.		5.1 TITL	5.1 TITLE		Change Addition			
NAME				5 2 NAM					
STREET ADDRESS				5 3 STREET A					
CITY-ST-ZIP	<del></del>			5.4 CITY		I - ZIP	Change Addition		
TITLE NAME				T PETELE	6.1 TITU 6.2 NAM			C change C Addition	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP					6.4 CIT		1		
	<del></del>				0.1011		<del> </del>		

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 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.

4-14-92