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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #**

1. Corporation BRETT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(*)					
Principal Plac	Place of Business PSTREET COURT DO FL 32837 PARTEET COURT DO FL 32837 Mailing Address 717 E OAK ST KISSIMMEE FL 34744 US Page 1912 Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Mailing A					114 MALLE MALSE BRITE SAT	H MAIGH (BIG) IN	AMA AMAL AMALI
1213 UP STREET COURT ORLANDO FL 32837		KISSIMMEE FL	KISSIMMEE FL 34744		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Q 12/26/1996	ualified		
2. Principal F	Place of Business	2a. Mailing Addr	ess		4. FEI Number		I A	pplied For
11		26	26					ot Applicable
Suite, Apt	#, etc.					59-34 15802 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Regulred		
City & Stat	do .				A 51 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
23	10	⊢			6. Election Campaign Fina Trust Fund Contribution			May Be to Fees
Zip	Country			Country	6. This corporation owes			
24	25		<u> </u>		Personal Property Tax] No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of	New Registered	Agent	
12	13 UP STREET CT	, ,		82 Street 747 83	ress (P.O. Box Number is Not ast Oak Street 3	Acceptable)	STRO	27
				_Ki s	mmee ST.CLUUD	FL	85 Zip 34	Code 69
11. Pursuant office or a agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Sig am familiar with, and accord the obj	502 and 607,1508, Florid light Florida, Such chan locations of Section 607.	la Statutes, th ge was autho 0505, Florida	ne above-named rized by the corp Statutes.	poration submits this statement tion's board of directors. I here	for the purpose o	f changing it pointment as	ts registered registered
SIGNATURE			WOTE D.			4/24/98		
12.					ADDITIONS/CHANGES	O OFFICERS AND	DIRECTOR	RS IN 12
TOLE					ADDITIONO/OTANGEO	O OTTOCHO AND	Change	XX Addition
NAME							_ •	7115
STREET ADDRESS				1.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL				837			
TITLE		☐ DE		2.1 TITLE	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET ADDRESS				
CITY-ST-ZIP				2. 4 CITY-ST-ZIP		_		
TITLE		☐ DE	LETE :	3.1 TITLE			Change	☐ Addition
NAME] :	3.2 NAME				
STREET ADDRESS			[:	3.3 STREET ADDRESS				
CITY-ST-ZIP				3.4. CITY-ST-ZIP				
TITLE		□ D¥	LETE	4.1 TITLE			Change	Addition
NAME	[] .	4. 2 NAME				
STREET ADDRESS			1	4.3 STREET ADDRESS				

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 empayered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME **5 3 STREET ADDRESS**

6.1 TITLE

6.2 NAME

DELETE

DELETE

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

TITLE

NAME STREET ADDRESS

Addition

FILED

May 13 1998 8:00am

Secretary of State