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

PROFIT CORPORATION ANNUAL REPORT

1**9**98

STREET ADDRESS CITY - ST- ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000002249 (5)

OZLAND, INC.				
Principal Place of Business	Mailing Address		{	0110 11010 11011 01010 1011 1001
3440 SEVENTH AVENUE SW NAPLES FL 34117	3440 SEVENTH AVENUE S NAPLES FL 34117	SW	DO NOT MOUTE IN THE	10 0D4 CE
			DO NOT WRITE IN THI 3. Date Incorporated or Qualified 01/06/1997	IS SPACE
2. Principal Place of Business 21	2a. Mailing Address 26		4. FEI Number 5 4049	Applied For Not Applicable
Suite, Apt #, etc.	Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 25 25 9. Name apt Address of C		Country 30	This corporation owes or has paid the opersonal Property Tax due June 30. Name and Address of New Registers	Yes No
SUITE TO NABLES Ft. 34103 11. Pursuant to the provisions of Sections of office or registered agent, or both, or the agent. I am familiar with, and except the SIGNATURE Signature types or present tame or registered.	un De raco	83 84 City ss, the above-named corpulhorized by the corporation of Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	
12. OFFICE	RS AND/DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE PRESIDENT DOPOTHUL BE 3440 THE AVERAGE NAPLES FL		1 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP		☐ Change ☐ Addilion
TITLE NAME STREET ADDRESS CHY-ST-ZIP	DELFTE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DATTE	3 1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-7IP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DESTIE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST- 7IP		Change Addition
TITLE	☐ DELETE	51 THLE	1	☐ Change ☐ Addition

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 suppliemental 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 of trustee emporance to execute this report as required by Chapter 607, Fjorida Statutes; and that my name appears in

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CHY-S1-ZIP

5.4 CITY - S1 - 7IP

6.1 TITLE

6.2 NAME

DELETE

***150.00

Change -06/12/00 01/00

-06/12/98--01027--0**3**3

FILED

Jun 12 1998 8:00am

Secretary of State