**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P97000016933

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

## FILED Apr 14, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State 04-14-1999 90210 024 \*\*\*150.00

	NTING ALLIANCE, INC.								
Principal Plac	e of Business	Mailing Address	***			LAIFI ACIN AAINI	11818 BIILD 18198		
6245 WEST GA	ATE DRIVE	6245 WEST GATE DRIVE							
SUITE 1902 SUITE 1902		- · ·		DO NOT WRITE IN THIS SPACE					
ORLANDO FL 32835 ORLANDO FL 32835					3. Date Incorporated or Qualifer		SPACE		1
					02/19/1997	J			
0. D.ii	to a di Ducinosa	2a. Mailing Address			4. FEI Number		Δn	plied For	1
—	lace of Business		DOINE		59-3429574		_ <del> </del>	t Applicable	1
21 5729 Suite, Apt.	MILAND DEIVE	26 5434 //// LAND Suite, Apt. #, etc.	7-11-		33 3423314		\$8.75 A		1
22 162		27 1629			5. Certifcate of Status Desired		Fee Re		
City & Stat		City & State			6. Election Campaign Financing		\$5.00	May Be	
23 OKLA	, <del></del>		Fi.		Trust Fund Contribution	' 🗆	Added t	•	
Zip	Country	Zip	Country		8. This corporation owes the cu	rrent year Int	angible		
24 32817	25 USA	29 32810 3	usa usa		Personal Property Tax.	-	☐ Yes	□No	ļ
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New	Registered	Agent		-
			81 Nam	DI	EHL, GREGORY				
	IL, GREGORY		82 Stree	t Addre	ss (P.O. Box Number is Not Accept	table)		·	1
	4 CHIANTI DRIVE		<u> </u>	1439	MILAND DRIVE	# 16:	29		
ORL	ANDO FL 32819		83						
			84 City				85 Zip (	Code	1
				RLA	<u> </u>	<u>FL</u>	.   32	810	]
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1508, Florida Statutes	s, the above-name	d corpor	ration submits this statement for the	e purpose of	changing its	registered aistered	
agent. I a	registered agent, or both, in the State im familiar with, and accept the poliga	tions of, Section 607.0505, Florid	da Statutes.	poration	13 Board of directors. Thereby doc			<b>3.2.2.</b>	
SIGNATURE	(Ousor . Hu	4				45199			
DIDITATIONE	Signature, typed print of name of registered agent	. Law V. W. C. Martin Control							
		<u>''</u>	Registered Agent signatur	e required y		CEICEDE AA	ID DIRECTO	DC IN 12	1 8
12.	r _ · · · · · · · · · · · · · · · · · ·	D DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AN			
TITLE	D	<u>''</u>	13. 1.1 TITLE	Per	ADDITIONS/CHANGES TO O		ID DIRECTO	RS IN 12	1 20
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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 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 appears, with all other like empowered.

SIGNATURE: