PROFIT CORPORATION ANNUAL REPORT 1998	Sandra I Secreta	RTMENT OF STATE B. Mortham ary of State CORPORATIONS		998 8:00ar ry of State
Principal Place of Business 17 8. MAGNOLIA AVENUE ORLANDO FL 32801	7000023398 (5) CO. Maiiling Address 17 S. MAGNOLIA AVENU ORLANDO FL 32801		DO NOT WRITE	E IN THIS SPACE
			3. Date incorporated or Qualified 03/10/1997	_
2, Principal Place of Business	2a. Mailing Address	······	4. FEI Number	Applied For
Sulte, Apt. #, etc.	26 Suite, Apt. #, etc.	······		88.75 Additional
22	27 		5. Certificate of Status Desired	Fee Required
City & State	City & State		 Election Campaign Financing Trust Fund Contribution 	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has pa	id the current year Intangible
24 25 25 Name and Address	29 of Current Registered Agent	30	Personal Property Tax due June 10. Name and Address of New Re	
MATONIS, STEPHEN J 17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both in		83 84 City	dress (P.O. Box Number is Not Acceptat	FL 85 Zip Code
 17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE 	ns 607.0502 and 607.1508, Florida Statu n the State of Florida. Such change was it the obligations of, Section 607.0505, Fl registered agent and alle if applicable (NO	82 Street Ad	provide the statement for the providence of the providence of the statement for the providence of the statement for stat	FL 85 Zip Code
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Signature, typed or printed runnic of 12. OFF	Is 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was It the obligations of, Section 607.0505, Fl registered agent and sticul applicable (NO ICERS AND DIRECTORS	82 Street Adr 83 84 City tes, the above-named co authorized by the corpor torida Statutes. 15: Registered Agent signature req 13.	provide the statement for the providence of the providence of the statement for the providence of the statement for stat	PL 85 Zip Code burpose of changing its registered bits registered DATE DATE DIRECTORS IN 12
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Signature, typed or printed reason of 12. OFF TITLE NAME President	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was ti the obligations of, Section 607.0505, Fl registered agrest and site if applicable (NOT ICERS AND DIRECTORS	82 Street Adr 83 84 City tes, the above-named co authorized by the corpor torida Statutes. 15: Registered Agent signature req	propration submits this statement for the p ation's board of directors. I hereby accep wired whon reinstaing)	PL 85 Zip Code burpose of changing its registered bits registered DATE DATE DIRECTORS IN 12
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Signature: typed or printed runne of 12. OFF 11. President Stephen J. Ma STREET ADDRESS 12 S. Magnoli	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was t the obligations of, Section 607.0505, Fl registered agent and other applicable (NOI ICERS AND DIRECTORS	B2 Street Adv B3 B4 City tes, the above-named co authorized by the corpor torida Statutes. IE: Registered Agent signatuke reg 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	propration submits this statement for the p ation's board of directors. I hereby accep wired whon reinstaing)	B5 Zip Code burpose of changing its registered pointment as registered DATE DATE
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Stomature, typed or printed runnie of 12. OFF TITLE NAME STREET ADDRESS DITY-ST-ZIP ORLANDO FL 32801	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was tithe obligations of, Section 607.0505, Fl registered agent and other applicable (NOI ICERS AND DIRECTORS DELETE tonis a Avenue	B2 Street Adv B3 B4 City tes, the above-named co authorized by the corpor torida Statutes. IE: Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP	propration submits this statement for the p ation's board of directors. I hereby accep wired whon reinstaing)	FL 85 Zip Code purpose of changing its registered pointment as registered DATE CERS AND DIRECTORS IN 12 Change Additi
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Signature: typed or printed runne of 12. OFF TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME Vice President	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was tithe obligations of, Section 607.0505, Fl registered agent and ble if applicable (NO ICERS AND DIRECTORS DELETE tonis a Avenue 32801. DELETE t	B2 Street Adv B3 B4 City tes, the above-named co authorized by the corpor torida Statutes. IE: Registered Agent signatuke reg 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	propration submits this statement for the p ation's board of directors. I hereby accep wired whon reinstaing)	FL 85 Zip Code purpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Signature: typed or printed runne of 12. OFF TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS PAUL W. Mac D	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was tithe obligations of, Section 607.0505, Fl registered agent and ble if applicable (NO ICERS AND DIRECTORS DELETE tonis a Avenue 32801. DELETE t t ermott	82 Street Adv 83 84 84 City tes, the above-named co authorized by the corpor torida Statutes. 12 Registered Agent signature req 13 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-SI-ZiP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	propration submits this statement for the p ation's board of directors. I hereby accep wired whon reinstaing)	FL 85 Zip Code purpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Stoneture, typed or printed runne of 12. OFF 11. President NAME STRET ADDRESS CITY-ST-ZIP TITLE NAME STRET ADDRESS CITY-ST-ZIP 17. S. Magnoli Orlando, Fl. Vice Presiden STRET ADDRESS CITY-ST-ZIP 17. S. Magnoli	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was tithe obligations of, Section 607.0505, Fl registered agent and all of applicable (NOT ICERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE it ermott a Avenue	82 Street Adv 83 84 84 City tes, the above-named consummary of the corport authorized by the corport torida Statutes. 12 13 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - S1 - ZiP 2.1 TITLE 2.2 NAME	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code burpose of changing its registered bare DATE
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE Stoneture, byted or printed number of 12. OFF 11. President NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS DITY-ST-ZIP 17. S. Magnoli Orlando, Fl. Vice Presiden STREET ADDRESS Paul W. Mac D GITY-ST-ZIP 17. S. Magnoli	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was tithe obligations of, Section 607.0505, Fl registered agent and all of applicable (NOT ICERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE it ermott a Avenue	82 Street Adv 83 84 84 City tes, the above-named construction of the corport 1000000000000000000000000000000000000	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code Durpose of changing its registered bare DATE Care DATE Change Additi CERS AND DIRECTORS IN 12 Additi Change Additi
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE DITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP ITLE NAME STREET ADDRESS CITY-ST-ZIP 17. S. Magnoli Orlando, Fl. 3 NAME STREET ADDRESS CITY-ST-ZIP 17. S. Magnoli	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was tithe obligations of, Section 607.0505, Fl registered agent and all of applicable (NOT ICERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE it ermott a Avenue	82 Street Advised Advise	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code burpose of changing its registered bare DATE
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE SIGNA	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was tithe obligations of, Section 607.0505, Fl registered agent and all of applicable (NOT ICERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE it ermott a Avenue	82 Street Adv 83 84 84 City tes, the above-named co authorized by the corportorida Statutes. 1000000000000000000000000000000000000	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	B5 Zip Code burpose of changing IIs registered parpose of changing IIs registered DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE SIGNATURE SIGNATURE SIGNATURE Definition STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Dr1ando, F1. NAME STREET ADDRESS CITY-ST-ZIP 17 S. Magnoli Orlando, F1. NAME STREET ADDRESS CITY-ST-ZIP TITLE Orlando, F1. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was the obligations of, Section 607.0505, Fl registered aucht and bited applicable (NOI ICERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE It ermott a Avenue 2801 DELETE	82 Street Adia 83 84 84 City 1000 tes, the above-named consultionized by the corportion of a statutes. 1000 tes, the above named consultionized by the corportion of a statutes. 11 111 TITLE 1.1 1.2 NAME 1.3 1.3 STREET ADDRESS 1.4 2.1 TITLE 2.2 2.1 TITLE 2.3 2.3 STREET ADDRESS 2.4 2.3 STREET ADDRESS 3.1 3.1 TITLE 3.2 3.3 STREET ADDRESS 3.4 3.4 CITY - ST - ZIP 4.1 4.1 TITLE 4.2 4.2 NAME 3.3	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	B5 Zip Code purpose of changing Its registered parpose of changing Its registered DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE President NAME STREET ADDRESS DITY-ST-ZIP Vice President NAME STREET ADDRESS CITY-ST-ZIP UTLE NAME STREET ADDRESS CITY-ST-ZIP JZ.S. Magnoli Orlando, Fl. 3 NAME STREET ADDRESS CITY-ST-ZIP ITILE Orlando, Fl. 3 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was the obligations of, Section 607.0505, Fl registered aucht and bited applicable (NOI ICERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE It ermott a Avenue 2801 DELETE	82 Street Adv 83 84 84 City tes, the above-named co authorized by the corporioridal Statutes. 11 Title 12 Registered Agent signature req 13 1.1 TITLE 1.2 NAME 1.3 STREFT ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-SI-ZIP	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	B5 Zip Code purpose of changing Its registered parpose of changing Its registered DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE DIT NAME STREET ADDRESS DITY-ST-ZIP Orlando, F1. NAME STREET ADDRESS CITY-ST-ZIP 17_S. Magnoli Orlando, F1. NAME STREET ADDRESS CITY-ST-ZIP 17_S. Magnoli ITILE Orlando, F1. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	IS 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was the obligations of, Section 607.0505, Fl registered aucht and bited applicable (NOI ICERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE It ermott a Avenue 2801 DELETE	82 Street Adia 83 84 84 City 1000000000000000000000000000000000000	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code burpose of changing its registered parpose of changing its registered DATE DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE President NAME STREET ADDRESS CITY-ST-ZIP Drlando, Fl. NAME STREET ADDRESS CITY-ST-ZIP TITLE	Is 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was to the obligations of, Section 607.0505, Fl registered agent and blir if applicable (NOT ICLERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE it ermott a Avenue 2801 DELETE DELETE	82 Street Adv 83 84 84 City 1es, the above-named co authorized by the corporioridal Statutes. 1000000000000000000000000000000000000	arporation submits this statement for the p ation's board of directors. I hereby accep suired when reinstating) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code burpose of changing its registered parpose of changing its registered DATE DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE President NAME STREET ADDRESS CITY-ST-ZIP ITILE <	Is 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was to the obligations of, Section 607.0505, Fl registered agent and blir if applicable (NOT ICLERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE it ermott a Avenue 2801 DELETE DELETE	82 Street Addition 83 84 84 City 185 B4 186 City 187 B4 188 City 188 B4 188 City 188 City 198 Statutes 11 TITLE 12 NAME 13 STREET ADDRESS 14 City - ST - ZiP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 City - ST - ZiP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ation's board of directors. I hereby acception submits this statement for the plation's board of directors. I hereby acception when reinsteing) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code purpose of changing its registered parte DATE DERS AND DIRECTORS IN 12 Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE President NAME STREET ADDRESS CITY-ST-ZIP Drlando, Fl. NAME STREET ADDRESS CITY-ST-ZIP JTLE NAME STREET ADDRESS CITY-ST-ZIP JT.S. Magnoli Orlando, Fl. STREET ADDRESS CITY-ST-ZIP JT.S. Magnoli Orlando, Fl. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRE	Is 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was to the obligations of, Section 607.0505, Fl registered agent and blir if applicable (NOT ICLERS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE it ermott a Avenue 2801 DELETE DELETE	82 Street Adv 83 84 84 City 1es, the above-named co authorized by the corporioridal Statutes. 1000000000000000000000000000000000000	ation's board of directors. I hereby accept suired when reinsteing) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code purpose of changing its registered parte DATE DERS AND DIRECTORS IN 12 Change Addition Change Addition
17 S. MAGNOLIA AVENUE ORLANDO FL 32801 11. Pursuant to the provisions of Section office or registered agent, or both, in agent. I am familiar with, and accep SIGNATURE President NAME STREET ADDRESS CITY-ST-ZIP UTLE NAME STREET ADDRESS CITY-ST-ZIP UTLE Orlando, Fl. NAME STREET ADDRESS CITY-ST-ZIP TITLE Orlando, Fl. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	ns 607.0502 and 607.1508, Florida Statu In the State of Florida. Such change was to the obligations of, Section 607.0505, Fl registred age it and blir if applicable (NOT ICE RS AND DIRECTORS DELETE tonis a Avenue 32801 DELETE t ermott a Ayenue 2801 DELETE DELETE DELETE	82 Street Addition 83 84 84 City 185 B4 186 City 187 B4 188 City 188 B4 188 City 188 City 198 City 198 City 1001 City 111 City 121 City 13. City 13. Street Address 14 City - S1 - ZiP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City - S1 - ZiP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City - S1 - ZiP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 City - S1 - ZiP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4	ation's board of directors. I hereby acceptived when reinstaing) ADDITIONS/CHANGES TO OFFIC	FL 85 Zip Code purpose of changing its registered parte DATE DERS AND DIRECTORS IN 12 Change Addition Change Addition