

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1998 8:00am
Secretary of State

DOCUMENT # P97000024686 (2)

GALLOWAY & ASSOCIATES, P.A.

Principal Place of Business
201 SOUTH ORANGE AVENUE
SUITE 1010
ORLANDO FL 32801

Mailing Address
201 SOUTH ORANGE AVENUE
SUITE 1010
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/18/1997

4. FEI Number 59-34328-63

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution ☐ Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

21	22	23	24	25	26	27	28	29	30
Principal Place of Business					Mailing Address				
1000 Universal Studios Plaza Suite, Apt. #, etc. Building 22A Room 218 City & State Orlando, FL Zip 32819 Country					1000 Universal Studios Plaza Suite, Apt. #, etc. Building 22A Room 218 City & State Orlando, FL Zip 32819 Country				

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

81	Name
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82	Street Address (P.O. Box Number is Not Acceptable)
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83

84	City
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FL

85	Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registrant aged 18 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	GALLOWAY, GREGORY B	
STREET ADDRESS	201 S ORANGE AVE, STE 1010	
CITY - ST - ZIP	ORLANDO FL 32801	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
1.2 NAME	Galloway Gregory B		
1.3 STREET ADDRESS	1000 Universal Studios Plaza, Bldg 22A		
1.4 CITY - ST - ZIP	Orlando, FL 32819		

2.1 PRICE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		

4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		

5.1 TITLE	SC 5/1	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			

6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME	100002509771	
6.3 STREET ADDRESS	-05/04/98--00000--000	
6.4 CITY - ST - ZIP	***150.00	

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 address.

SIGNATURE:

Pres. 4/22/98 (407)352-1070

CPR2E034 (10/97)