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PROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #
1. Corporation Name



Secretary of State DIVISION OF CORPORATIONS P97000025682 (0)

May 15 1998 8:00am Secretary of State

4/21/98 694-5058

1116 17	ACTORY, INC.				
Principal Place	o of Business	Mailing Address	<u></u>	{ 1 (88/188/ 1/0 /8/1/ 1/08/ 90/ 1/ 6/	DIKO 10001 DIKIO DIKIDI KUKO ILUK KABI
•	9 CORPORATE SQUARE	1987 UNIT 159 CORPO	DRATE SOLIARE		
LONGWOOD FL 32570		LONGWOOD FL 32570		DO NOT WOLTE IN	TI NO COAOE
				DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS STACE
				03/17/1997	
2. Principal Pi	ace of Business	2a. Mading Address	1 1	4. FEI Number	Applied For
21753	Pousiness Center	2 26 753 N I	104 17 92	. 59.3498102	Not Applicable
Suite, Apt.	#, etc. > 8 D	Sinte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	BE SPRING FL	City & State	SPRINGS FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z _I p.	Country	Z(s)	Country	8. This corporation owes or has paid the	he current year Intangible
<u> 3273</u>	50 25 SEMINDUE		30 2 0 M100		Yes No
	g, Name and Address of Curren	t Registered Agent		10. Name and Address of New Regist	lered Agent
	LEMAN, KYLE W		81 Name		
	2 SECRET WAY		82 Street Address (P.O. Box Number is Not Acceptable)		· · · · · · · · · · · · · · · · · · ·
CA	SSELBERRY FL 32707		83		
			63		
			84 City		FL 85 Zip Code
				occupation submits this statement for the pure	1
office or re agent. I ar	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga-	of Florida. Such change wa	as authorized by the corpo	rration's board of directors. Thereby accept th	le appointment as registered
office or re agent. Lar SIGNATURE	egistered agent, or both, in the State	of Floridal Such change wa altions of, Section 607.0505, ed and Phentapplicable	as authorized by the corpo	ration's board of directors. Thereby accept th	DATE S AND DIRECTORS JN 12
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