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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMEN

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000032310 (9)

S.B. FINANCIAL CORP.

Principal Place of Business

Mailing Address

8125 SANDPOINT BLVD ORLANDO FL 32819

SIGNATURE:

8125 SANDPOINT BLVD ORLANDO FL 32819 FILED Jan 26 1998 8:00am Secretary of State



2. Principal Pace of Builhess 2a. Mailing Address 2a. Mailing	UHLANDU FI	_ 32819	URLANDO FL 328	319		DO NOT WRITE IN THIS SPACE		
22. Mainty Address 2a. Mainty Address 5a. Maint						3. Date incorporated or Qualified		
22. Mainty Address 2a. Mainty Address 5a. Maint						04/09/1997	,	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	2. Principal P	lace of Business	2a. Mailing Addres	is			Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	21		26			59-344623/	Not Applicable	
City & State City & State City				tc.				
City & State City &	22		27	27		5. Certificate of Status Desired	Fee Required	
23		3	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip Country Zip Country Zip Country Service compared the current year Integrable Personal Property Tax due June 30. Yes Divo	23	28			Trust Fund Contribution			
9. Name and Address of Current Registered Agent HILLMANWALLER, LOUIS M 901 PONCE DE LEDN BLVD, SUITE 502 CORAL GABLES FL 3334 82 Street Address (P.O. Box Number is Not Acceptable) 83 B2 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 697,0502 and 697,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. an imminist with, and accept the children's Statutes. 85 Signature 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. TITLE 15. TITLE		Country	Zip	Zlp Country		8. This corporation owes or has paid the o	current year Intangible	
9. Name and Address of Current Registered Agent HILLMAN-WALLER, LOUIS M 901 PONCE DE LEON BLVD, SUITE 502 CORAL GABLES FL 3334 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purposes of changing lis registered agent, or both, in the State of Florids, Such change was entired agent, and accept the obligations of, Section 607.0505, Florids Statutes, the above-named corporations board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florids Statutes, the above-named corporation submits this statement for the purposes of changing lis registered agent agent agents agen	24	25	29	30				
POINCE DE LEON BLVD, SUITE 502 CORAL GABLES FL 3334 Ba City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Poridas Statutes, the above-named corporation's board of directors. I hereby accept the high gits registered agent, or both, in the State of Findida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent or both and accept the obligations of, Section 607,0502 and 607,1508, Poridas Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and final accept the obligations of, Section 607,0605, Princias Statutes. SIGNATURE 12.	·	9. Name and Address of	Current Registered Agent			10. Name and Address of New Registere	d Agent	
901 PONCE DE LEON BLVD, SUITE 502 CORAL GABLES FI. 3334 82 Stroet Address (P.O. Sox Number is Not Acceptable) 83 84 City FL 85 Zip Code 94 City FL 85 Zip Code 95 Zip Code 96 Zip Code 971. 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 agent, to 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 96 SIGNATURE States and States are states and states are states agent and a special states. 97 SIGNATURE States are states are states and states agent and are applicable. (NOTE Registered Agent signature registered when retraiting) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17ILE D SIRK, STEVEN E 1812 SANDPOINT BLVD 12. STREET ADDRESS 12. SANDPOINT BLVD 13. STREET ADDRESS 22. STREET ADDRESS 23. STREET ADDRESS 24. ADITY-ST-ZIP 17ILE D STREET ADDRESS 24. ADITY-ST-ZIP 17ILE D Change Addition NAME 18 STREET ADDRESS 25. STREET ADDRESS 26. ADITY-ST-ZIP 17ILE Change Addition 18 Addition 18 ADDRESS 27 STREET ADDRESS 28 STREET ADDRESS 29 STREET ADDRESS 29 STREET ADDRESS 29 STREET ADDRESS 20 STREET ADDRESS 21 TITLE 21 TITLE 22 Change Addition 25 NAME	HII	LMAN-WALLER, LOUIS M			81 Name		·	
CORAL GABLES FL 3334 B3						Iraca (B.O. Pay Number is Not Assentable)	-	
83 84 City FL 85 Zip Code	· · · · · · · · · · · · · · · · · · ·				5 Street Add	Street Address (P.O. Box Number is Not Addeptable)		
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, 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, 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, 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, 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, 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, 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, or both appointment as registered agent,	CONAL GADLES FL 3334				83			
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11. Pursuant to the provisions of Sections 607 0502 and 497, 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florids Statutes. SIGNATURE					84 City		85 Zip Code	
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 agent, and accept the obligations of, Section 607.0505, Floridas Statutes. SIGNATURE	11 Purcuant I	a the provisions of Sections 6	07.0502 and 607.1508. Florida	Statutes the	above-named corr		_	
SIGNATURE Signature report or printed rainer of inerptatered agent and time if applicable (NOTE Registered Agent signature required when relatating)	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							
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12.	SIGNATURE					C. C		
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CITY-S1-7IP				I				
14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal e								
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 an 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 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 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 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 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 an 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 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 an 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 an 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 an 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 an 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 an 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 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 an annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the same and accurate an annual report is true and accurate an annual report is true and accurate	14 hereby a	ertify that the information supr	slied with this filling does not a	alify for the e	xemption stated in	Section 119.07(3)(i), Florida Statutes, I further	certify that the information	
	indicated	on this annual report or supple	emental annual report is true a	nd accurate a	nd that my signatu	are shall have the same legal effect as if made	under oath; that I am an	