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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

P97000035881 (6)

JULIO MORAN, INC.

FILED Apr 22 1998 8:00am Secretary of State



	e of Business	Mailing Address		
	N BOULEVARD	1244 MARTIN BOULE	VARD	
ORLANDO FL	L 32625	ORLANDO FL 32825		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				04/21/1997
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-3482 484 Not Applicable
Suite, Apt.	#. etc.	Suite, Apt #, etc.		SR 75 Additional
22		27		5. Certificate of Status Desired Fee Regulred
City & State	θ	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Inlangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer			10. Name and Address of New Registered Agent
MC	ORAN, JULIO		81 Name	
1244 MARTIN BOULEVARD				
	RLANDO FL 32825		82 Street	Address (P.O. Box Number is Not Acceptable)
Ur	NEWYDU FE 32023		83	
			84 City	FL 85 Zip Code
44 Distance t	to the provinces of Continue CO7 OF	20 and 607 1500 Clarida Ota	tutas the above semed	
office or re	egistered agent, or both, in the State	of Horida, Such change wa	totes, the above-hamed	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
		, or monda, ducin ondrige wa	is admonitor by the corp	
agent. I a	i m fa miliar with, and accept the oblig	ations of Section 607.0505,	Florida Statutes.	, and the second of the second
SIGNATURE				
SIGNATURE	Signature, typed or printed han e of registered ag-	ont and title if applicable (fi	IOTE: Registered Agent signature	e required when reinstating) DATE
SIGNATURE	Signature, typed or printed han e of registered ago OFFICERS AN	ont and talle it applicable (NID) DIRECTORS	IOTE: Registered Agent signature	e required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed or pinned name of registered ago OFFICERS AN	ont and title if applicable (fi	ICH: Registered Agent signature 13. 1.1 TITLE	e required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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Indicated on this arthur report or supplementar antidar report is true and accurate and that my signature shall have the same legal effect as it made under oath; that it am a officer or of the corporation or the receiver or frustee expowered 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.

GNATURE:

SIGNATURE:

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