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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1998

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POCUMENT # P9700036688 (4)

DANIEL J. O'KEEFE, C.P.A., P.A.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1-SOUTH ORANGE AVENUE 1-SOUTH ORANGE-AVENUE SUITE 500 DO NOT WRITE IN THIS SPACE OPLANDO FL 32801 ORLANDO FL 32801 3. Date Incorporated or Qualified 04/23/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59-3440288 Aloma Auc 1870 Hana Auc Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes XNo 29 4&U Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent O'KEEFE, DANIEL J.C.P.A. -1 SOUTH ORANGE AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 SUITE SOO 2651 Cochise Trail 83 OPLANDO FL 32801 City Winter Zip Code 32785 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. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and the if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change __ Addition 1.1 TITLE NAME O'KEEFE, DANIEL J 12 NAME -102 DETMAR DRIVE STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK EL 32780 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP TITLE DELETE Change Addition 3.1 TITLE 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY - ST- ZIP DELETE Addition TITLE 4.1 THEE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE Change 6.1 TITLE NAME 62 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not quality 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 13 if changed or on an attrichment with an address.