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

CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000048732 (6)

CHOO CHOO 507, INC.

FILED Jun 04 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address		
l . '	KT-PICKIOK ROKP	MAX XSIRING MAX LAUNE ACCESSION	rverish.	
NAME AND A STATE OF THE PARTY O	CALLER FOR FURNIS	XXXXXX	1200MD	
MACTERIAL RACH		MARKANDAKARA		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
2. Principal Pla	on of Queinoer	2a. Mailing Address		05/30/1997 · Applied For
21 2077	Character II a RA	26 2077 Cur	ruville 1	4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt. #	elc.	Suite, Apt. #, etc.	TANTIC	- \$8.75 Additional
22	2.00	27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23 () 14	Justa FL	28 Chulus	ra FL	■ Trust Fund Contribution ☐ Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 327	O 25 USA	. L ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	USA	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
	OEXPANIM PC		81 Name	njamin O. Benham
90 X	SOM DE XAKE DERUNK ROAD.		82 Street A	Address (P.Q. Box Number is Not Acceptable)
SURRECK 207				77 Curryville Road
WA	NAMOKIY AZZIX		83 0	bus 1 40 to
-			84 City	85 Zip Code
				FL 32766
11. Pursuant to office or re-	o the provisions at Sections 607.0502 gi stere d agent, or both, in the State o	and 607.1508, Florida Statules If Floryla. Such change was au	s, the above-named i thorized by the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. Thereby accept the appointment as registered
agont. Lam	familiar with, and accept the obligati	ionsløf, Section 607.0505, Flori	ida Statutes.	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE _	13 pm 0/8		Jamin O	Benham Pres. 1/15/98
12.	Identitive, type of or printed in the of respectively ingent OF LICERS AND		Redistered Agent signature (ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 TITLE	D/P Change ddition
NAME			1.2 NAME	Ronham, Benjamin O.
STREET ADORESS			1.3 STREET ADDRESS	2017 Curryville Road
CITY-ST-ZIP			1.4 CHY-ST-ZIP	Chuluota FL 32766
TITLE		DELETE	2.1 TITLE	DIDPS Change Addition
NAME			22 NAME	Benham, Kathleen Ma
STREET ADDRESS			2 3 STREET ADDRESS	2077 Curryville Road
CITY-ST-ZIP			2. 4 City-St-ZiP	Chulusta, FL 32766
TITLE		DITTE	3.1 TITLE	Change Addition
NAME	•		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			34 CITY-ST-ZIP	
TITLE		☐ DELFTE	4.1 TALE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DETETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY - ST - ZIP	······································		5.4 CITY - \$1 - 7IP	
TITLE		☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY - ST - ZIP			6.4 CITY-ST-ZIP	

14. Thereby 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.