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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000049335 (7)

GRACECOM PUBLISHING GROUP, INC.

FILED Mar 26 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Add	Mailing Address				4 seberade ma sont sout dans dans dons gour sides fared bisso stat dies seres		
8446 SHADY GLEN DR. ORLANDO FL 32819				8446 SHADY GLEN DR. ORLANDO FL 32819					
			V					DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
								06/04/1997	
2. Principal P	lace of Busine	SS	2a. Mailing	Address				4. FEI Number Applied For	
21			26	··				69 - 3450 928 Not Applicable	
Suite, Apt. #, etc.			27 Suite, Ap	Surte, Apt. #, etc.				5. Certificate of Status Desired	
City & State				City & State				6. Election Campaign Financing \$5.00 May Be	
23			28	28				Trust Fund Contribution	
Ζιp		Country	Zip		Co	untry	1	8. This corporation owes or has paid the current year Intangible	
24	2	5	29		30			Personal Property Tax due June 30. Yes No	
	9, Name a	nd Address of Curr	rent Registered Ag	ent			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered Agent	
VII	HLEN, SIDNE	YLIII				81	Name	1	
2180 W. STATE RD. 434, STE. 4159						82	Street A	t Address (P.O. Box Number is Not Acceptable)	
	DNGWOOD F		,			00,000,7	radios (1.5. box Hamber is Not Acceptable)		
						83			
	٤					1		[as] 7. O.d.	
						84	City	FL 85 Zip Code	
11. Pursuant	to the provisio	ns of Sections 607.0	502 and 607 1508,	Florida Statut	es, the a	above	e-named	d corporation submits this statement for the purpose of changing its registered	
office or r	registered age	nt, or both, in the Sta	ate of Florida, Such	change was a	authorize	ed by	the corp	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered	
	wii iaiiiiiai wijii	, and accept the of	ngations of, Section	007.0303,14	onua sie	iuies	5 .		
SIGNATURE	Signature, typed or	proted name of registered	agent and title if applicable	(NOI	f. Register	ed Age	ant signature	re required when reinstalting) DATE	
12,			AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		I	DELETE	1.11	TITLE		Change Addition	
NAME	ROBERT	SON, GRACE			1.21	NAME			
STREET ADDRESS		ady glen dr.			1.3 9	STREET	ADDRESS		
CITY-ST-ZIP	ORLAND	O FL 32819			1.40	CITY-S	IT-ZIP		
TITLE				DELETE		TITLE		Change Addition	
NAME					221	NAME	1		
STREET ADDRESS					235	STREET	ADDRESS		
CITY-ST-ZIP	!				1		ST-ZIP	1	
TITLE				DELETE	3.11			☐ Change ☐ Addition	
NAME					3.21	NAME	j		
STREET ADDRESS	1						ADDRESS		
CITY-ST-ZIP							ST-ZIP		
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							ADDRESS		
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TITLE			·	Descrit	6.11		1	T Outube T Volume	
NAME						NAME			
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP	L				6.4 (CITY - S	T-ZIP		

I hereby certify that the information surplied 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 surplemental 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 of the received 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 the project of the corporation of the corpo

407-345-9129