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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700062487 1. Corporation Name

120 NORTH ORANGE, INC.

Aug 03, 1999 8:00 am Secretary of State

08-03-1999 90001 002 ***550.00



	· · · · · · · · · · · · · · · · · · ·				
Principal Plac	ce of Business	Mailing Address		- I LEBITEUR FIND IBITAT ORFIT BRITA PRITA PRITA	8 85118 11831 BIBBI 18111 1881 1881
1 SOUTH ORANGE AVE 1 SOUTH ORANGE AVE		•			
SUITE 304 SUITE 304				,	
ORLANDO FL 32801 ORLANDO FL 32801				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualifed	
				07/18/1997	
└	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3461752	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Stat	te .	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	O+	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	ntangible □ Yes □ No I
24	25		30	Personal Property Tax. 10. Name and Address of New Registered	
	9. Name and Address of Curre	nt Registered Agent	* 81 Name	10. Name and Address of New Registered	Agent
NEJ	AME, MARK E		Ti Tiamo		
1 SOUTH ORANGE AVE			82 Street Add	fress (P.O. Box Number is Not Acceptable)	
SUITE 304			83		
ORLANDO FL 32801			63		
5712 11 50 ; II 5250 ;			84 City		85 Zip Code
				FI poration submits this statement for the purpose of	<u>- </u>
office or i agent. I a SIGNATURE	am familiar with, and accept the obliga	ations of, Section 607.0505, Flor	uthorized by the corporation of	ion's board of directors. I hereby accept the appointment of the directors of the appointment of the directors of the appointment of the appointme	nntment as registered
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	7,551.7011670.111102.10.71	☐ Change ☐ Addition
NAME	NEJAME, MARK	-	1.2 NAME		
STREET ADDRESS 1 SOUTH ORANGE AVE, SUITE 304			1.3 STREET ADDRESS		
Į	ORLANDO FL 32801	L 001			
CITY-ST-ZIP	ONEANDO LE GEGOT	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
			2.2 NAME		
NAME			2.3 STREET ADDRESS		
STREET ADDRESS					1
CITY-ST-ZIP		☐ DELETE	2.4 City-ST-ZIP 3.1 Title		Change Addition
NAME			3.2 NAME		_ , _
STREET ADORESS]		3.3 STREET ADDRESS		ĺ
\	Ì				
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME	Ì		4.2 NAME		
		•			
STREET ADDRESS	}		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TITLE	{		5.2 NAME		
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP		□ herere	6.1 TITLE		☐ Change ☐ Addition
TITLE		☐ DELETE	0.1 (115.1		Change Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 effectment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

2/2/99 (407