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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State \*\*
DIVISION OF CORPORATIONS

DOCUMENT # P97000077796 (5)

## FILED Jun 18 1998 8:00am Secretary of State

THE G	YGES CORPORATION				
Principal Plac	e of Business	Mailing Address		r sannons in rain rain gain gain gnin ghil ghil	is 18811 (801) (0010 10110 0111 1001
1223 WEST YALE AVE ORLANDO FL 32004		1223 WEST YALE AVE ORLANDO FL 32804		DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualified	
				09/09/1997	
2. Principal P	B HAROLD IVE.	2a. Mailing Address	LANDO AVE	4. FEI Number 181.11.A	Applied For
21 (65-1 Suite, Apt.		26 501 N. OR	LANGO AVE	- 57-3406161	Not Applicable
22 Suite, Apr.	#, <b>p</b> ic	27 #313-18	6	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	ER PARK, FL	28 WINTER PA	MEK, FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zp20	B Campo	27789	Country	8. This corporation owes or has paid the	
24 26 18	25 /3/1	29 56/0/	30 1/377	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren		81 Name	10. Name and Address of New Register	TO TAME
	O <b>rp</b> oration company of Mia I <b>1 &amp; B</b> iscayne Blvd	AMI	TUR	E BYERS LOW PORTHURN	JOE MIYO
	OO MIAMI CENTER		82 Street	Address (P.O. The Dumber) Not Acceptable	1223 W. YALE
	AMI FL 33131 -		83	BR	LANDO, FL 3280
••••			84 City	-0406	95 Zin Code A
			64	NOTER VOLVE	-L 32784
office or r agon. Ta SIGNATURE	egistered agent, or both, in the State in fandam with, and accept the obligi	of Florida, Such change was a aliquis of, Socilion 607,0505, Floring and Florida (NO)	authorized by the corporate Statutes.	poration's board of directors. I hereby accept the	<b>98</b>
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition
TITLE	D	DELETE	1.1 TITLE	]	☐ Change ☐ Addition
NAME	MAYO, JOSEPH A IV		1.2 NAME		
STREET ADDRESS	1223 WEST YALE AVE ORLANDO FL 32804		1.3 STREET ADDRESS		
CITY-ST-71P TITLE	UNLAMUU FL 32004	DELETE	1.4 CITY-ST-ZIP		
NAME					Change Addition
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			2.1 THEE 2.2 NAME 2.3 STREET ADDRESS	i i	Change Addition
CITY-ST-ZIP			2.2 NAME		☐ Change ☐ Addition
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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 armual report or supplied annual report is true and accurate and that my signature shall have the same legal effect as if made under early 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.

SIGNATURE: Allenzo

PRESIDENT

4/28/98 401/599-070