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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000081283 (8)

AMERICA ON-HOLD, INC.

FILED Feb 23 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			SALIBL DLOID DSCOT TREAD THE SON
631 BROOKH		631 BROOKHAVEN DRIVE			
ORLANDO FL 32803		ORLANDO FL 32803		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
'				09/19/1997	
`	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		O File Committee	Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Register	ad Agent
AMERILAWYER CHARTERED 81 Name					
343 ALMERIA AVENUE 82 Street Addi				dress (P.O. Box Number is Not Acceptable)	7
CORAL GABLES FL 33134			6	31 Brookh	aven hu
			83		
			84 City	-1 4	L 85 Zip Code
				riando F	L 3280.2
11. Pursuant office or f	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1508, Florida Statute di Florida. Such change was a	es, the above-named co uthorized by the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the a	appointment as registered
agent I a	um familiar with find accept the wilgs	lions of, Section 607.0505, Flo	rida Statutes.	0.13	7 00
SIGNATURE	- And Oxay	A COLUMN TO A COLU	B	2-1	/ - /s
12.	Signature, typed or printed name arrogistered you OFFICERS AND		Registered Agent signature req	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PSD	DELETE	1.1 TITLE		Change Addition
NAME	BEALS, TODD B		1.2 NAME		_ · _
STREET ADDRESS	631 BROOKHAVEN DRIVE		1.3 STREET ADDRESS		+
CITY-ST-ZIP	ORLANDO FL 32803		1.4 CITY - ST - ZIP		
TITLE	VTD	DELET E	2.1 TITLE		☐ Change ☐ Addition
NAME	Danielsson, Per		2.2 NAME		
STREET ADDRESS	631 BROOKHAVEN DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32803		2. 4 CITY-ST-ZIP		
TITLE		☐ DELET É	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		Last Ditteria	4.1 MAME		m orango m vanggui
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CÎTY-ST-ZIP		,
TITLE		☐ DELETE	5.1 TITLE		Change 2 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	<	(ID2)/77
CITY-ST-ZIP			5.4 CITY-ST-ZIP	,	
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	2000024386	î P E
STREET ADDRESS			6.3 STREET ADDRESS	2000024386 -02/24/3801009	032
CITY-ST-ZIP			6.4 CITY - ST - ZIP	***150.00	
indicated	on this applied tenors or supplements	Lannual toport is true and accu	irate and that my signat	n Section 119.07(3)(i), Florida Statutes. I further ture shall have the same legal effect as if made	under ooth that I am an I
officer or	director of the corporation or the rece	iver or trustee empowered to e	xecute this report as re	quired by Chapter 607, Florida Statutes; and that	at my name appears in
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 il changed, or or 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 il changed, or or 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					