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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P97000088832 (5)

A2ZCITY, INC.									I SARKIAR IND ININ INDI ANDI NAMI NAMI NAMI NAMI INDI INDI INDI INDI INDI INDI			
Principal	Place of Busines	Mailing Address						T CONTION (IS INTIL TORIS BRITT MATTE MATTE BRIEF TRIBE TRIBE TRIBE TRIBE TRIBE TRIBE TRIBET TRIBET.				
622 MORGAN STREET					822 MORGAN STREET							
WINTER SPRINGS FL 32708					WINTER SPRINGS FL 32708						DO NOT WRITE IN THIS SPACE	
											3. Date Incorporated or Qualified	
									10/14/1997			
2. Principal Place of Business					2a, Mailing Address						4 FEI Number Applied For	
21					26						59-3472540 Not Applicable	
Suite, Apt. #, etc.					Suite, Apt. #, etc.						5. Certificate of Status Desired S8.75 Additional	
22	2				27						Fee Required	
City & State					City & State						6. Election Campaign Financing \$5.00 May Be	
23				28	28						Trust Fund Contribution Added to Fees	
Zip						ountry			8. This corporation owes or has paid the current year Intangible			
24	6 None	25	Addronn of Curre	29	<b>4</b>		30				Personal Property 1ax due June 30. Yes No  10. Name and Address of New Registered Agent	
9, Name and Address of Curre					Hegistered Agent				81 Name		IV. Haine and Address of New Registered Agent	
ST. JOHN, KENNETH												
622 MORGAN STREET								82 Street Addre		t Addres	ss (P.O. Box Number is Not Acceptable)	
WINTER SPRINGS FL 32708								83				
								84	City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-name									e-name	d corpor	estion as harite this statement for the purpose of charging its registered	
The Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida statutes, the above harded corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent.												
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SIGNATU	Signature, types	f or pri	nted name of ring ferred ag	icol ano li	ne d'applicable	(NO	TE: Register	red Age	ot signatu	re requied	d which rounstating) DATL	
12.			OFFICERS AN	ID DIR			13				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TATLE					DELETE			11 TOLE   P/1		P/L	Change Addition	
NAME								NAME		KEI	NNETH ST. JOHN	
STREET ADDI											MORGAN ST	
CITY-ST-ZIF	·				☐ DELETE			1.4 C(TY - ST - 7)P		WIA	UTER SPRINGS, FL, 32708 Change PAddition	
TITLE								50				
NAME								2.2 NAME 2.3 STREET ADDRESS 62		CA	ROL ST. JOHN Z MORGAN ST.	
STREET ADDI	<b>[</b>											
CITY-ST-ZIF	1-ZIP				DELETE			31 TITLE		wi	WIER SPRINGS, FL 32708	
NAME					L.			NAME			- Ontango - Tudanon	
STREET ADD	DE CC								ADDRESS			
CITY-ST-ZIF	1							CITY-9				
TITLE					<b>T</b>	DELFTE		TITLE	<del>/</del>		Change Addition	
NAME	1						4. 2	NAME				
STREET ADDRESS					4.3 :			STREET	ADDRESS			
CITY-ST-ZIF	ſ						4.4	CHTY - S	T - 7(P			
TITLE						DELFTE	5.1	11116			Change Addition	
NAME							5.2	NAME		1		
STREET ADD	RESS						5.3	STREET	ADDRESS			
CITY-ST-ZIF	·						5.4	CITY - S	1-7(P			
TITLE					T	DELETE	6.1	1111.6			Change Addition	
NAME							6.2	NAME		1		
STREET ADD	RESS						6.3	STREET	ADDRESS			
CHTY-ST-ZIF								CITY-S		<u>L</u>		
14. I here	eby certify that th	e inf	ormation supplied v	with this	atima does	not quality t	or the ex	xemb	uon stat	tea in Si	ection 119.07(3)(i), Florida Statutes. I further certify that the information	

indicated on this annual report or supplied with mis ming does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 attactment with an address.

**FILED** 

Jan 20 1998 8:00am

Secretary of State