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 # P97000096248

1. Corporation Name

MORENO, PEELEN & COMPANY, P.A.

Principal Place of Business
15 W CHURCH ST. SUITE 201
ORLANDO EL 32801

Mailing Address

FILED Mar 10, 1999 8:00 am **Secretary of State**

03-10-1999 90258 024 ***150.00



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5 W CHURCH ST. SUITE 201 ORLANDO FL 32801	15 W CHURCH ST. SUITE 201 ORLANDO FL 32801			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 10/31/1997	
2. Principal Place of Business	2a. Mailing Address				4. FEI Number Applied For	
1	26				59-3478445 Not Applicate	ίe
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	-
City & State	City & State				6. Election Campaign Financing 55.00 May Be	
3	28				Trust Fund Contribution Added to Fees	
Zip Country	Zip	Coun	try		8. This corporation owes the current year Intangible Personal Property Tax.	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
PEELEN, SCOTT B		1	B1	Name		
15 W CHURCH ST, SUITE 201		1	82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32801		1	83			
		1	84	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 60	7.0502 and 607.1508, Florida State	utes, the ab	ove	-named corpo	pration submits this statement for the purpose of changing its registered	Ĭ

renseant to the provisions of Sections 607,0002 and 607,1000, Frontal activities, the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition ☐ DELETE 1.1 TITLE TITLE MORENO, ANTONIO JR 1.2 NAME NAME 15 W CHURCH ST, SUITE 201 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32801 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 2.1 TITLE PEELEN, SCOTT B 2.2 NAME NAME 15 W CHURCH ST. SUITE 201 STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32801 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied 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 supplied with this fitting does not quality for the exemption stated in Section 1.19.07(3)(f), Florida Statutes, I further certary that the mindicated 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 percent execute this report as required by Chapter 607, Florida Statutes; and that my name appears in attachment with an address, with all other like empowered. Block 12 or Block 13 if changed, or

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)