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

PROFIT. **CORPORATION** ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P97000103732

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90051 015 \*\*\*150.00

Principal P acc		Mailing Address						
6021 SILVEF: STAR ROAD ORLANDO FL 32808  6021 SILVER STAR ROAD ORLANDO FL 32808								
				DO NOT V  3. Date Incorporated or Quality	VRITE IN THIS	SPACE		ì
				12/08/1997	ieu			
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Ni mber		App	lied For	
21		26		59-34915 <u>69</u>		Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	d 🗆	\$8.75 A		
22		27				Fee Red		
City & 5 tat	le	City & State		6. Election Campaign Financi	ng 🖂	\$5.00 i	,	
Zip	Cour try	<b>Zip</b>	Country	Trust F und Contribution	aueront woor of	Added to	rees	
24	25	` -	30	<ol> <li>This corporation owes the Persor at Property Tax.</li> </ol>	current year in		□No	
	9. Name and Address of Current		-	10. Name and Address of Ne	w Registere d	Agent		
			81 Name					
	DRAHITA, LUIS F		82 Street Acid	Iress (P.O. Bo) Number is Not Acc	entable)		-	
	I SILVER STAR ROAD		OL OUBST FREE					
URL	ANDO FL 32808		83					
			84 City			85 Zip C	ode	
					FL	-		
office ⇔r r	to the provisions of Sections 607.0502 registered agent, or both, in the State our familiar with, and accept the obligat	⊪f Florida. Such change was ₃u	thorized by the corporat	poration submits this statement for ion's board of directors. I hereby ac	the purpose of scept the appoi	changing its i ntment as reg	stered	
agent. I a	um ramiliar with, and accept the obligat	ons of, Section 607.0505, From	ua Statut <del>es</del> .				:	
agent. I a SIGNATUF:E				red when reinstation)	DATE			
SIGNATUF:E	Signature, typed or printed name of registered agent	and title if applicable. (NOT ≣:	Registered Agent signature requir		DATE OFFICERS AN	ND DIRECTOR		(00)
-9		and title if applicable. (NOT ≣:		ADDITIONS/CHANGES TO		ND DIRECTO	S IN 12	(41,00)
SIGNATUFE	Signature, typed or printed name of registered agent	and title if applicable. (NOT =:	Registered Agent signature raqiil					04 (44,00)
SIGNATUF:E  12.  TITLE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOT =:	Registered Agent signature required 13.					C034 (44,00)
SIGNATUF:E  12.  TITLE  NAME	Signature, typed or printed as me of registered agent OFFICERS AND PIEDRAHITA, LUIS F	and title if applicable. (NOT =:	Registered Agent signature required 13.  1.1 TITLE  1.2 NAME			☐ Change	☐ Addition	DOCUM (44,00)
SIGNATUF:E  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AN! D PIEDRAHITA, LUIS F 6021 SILVER STAR ROAD	and title if applicable. (NOT =:	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS					CB2E034 (44,00)
SIGNATUF:E  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AN! D PIEDRAHITA, LUIS F 6021 SILVER STAR ROAD	and title if applicable. (NOT =:  DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			☐ Change	☐ Addition	CB2E034 (41/08)
SIGNATUF:E  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or printed name of registered agent OFFICERS AN! D PIEDRAHITA, LUIS F 6021 SILVER STAR ROAD	and title if applicable. (NOT =:  DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE			☐ Change	☐ Addition	CD2E034 (11/09)
SIGNATUF:E  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of registered agent OFFICERS AN! D PIEDRAHITA, LUIS F 6021 SILVER STAR ROAD	and title if applicable. (NOT E: DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			☐ Change	☐ Addition	CD2C034 (41(08)
SIGNATUF:E  12.  TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE SS	Signature, typed or printed name of registered agent OFFICERS AN! D PIEDRAHITA, LUIS F 6021 SILVER STAR ROAD	and title if applicable. (NOT =:  DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE			☐ Change	☐ Addition	CD2E034 (44/00)
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SIGNATUF:E  12.  TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS ANI D PIEDRAHITA, LUIS F 6021 SILVER STAR ROAD ORLANDO FL 32808	and title if applicable. (NOT =:  DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition Addition	(00) 141 (00)

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 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 changes, or on an attact ment with an address, with all other like empowered. CITY-ST-ZIP

ŞIGNATURE: ¥