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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

P97000106075 (9)

FILED Apr 14 1998 8:00am Secretary of State

Principal Plac 944 PINELAN ROCKLEDGE	ID DR.	Mailing Address 944 PINELAND DR. ROCKLEDGE FL 32955		DO NOT WRITE IN THI 3. Date Incorporated or Qualified 12/17/1997	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 83	O .W.	26 830 N. AP	Pollo Blud	59-3482668	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			V 114 D 11 B		\$8.75 Additional
22 APO	110 Blud	27 City & State		Certificate of Status Desired	Fee Required
City & State	lbourne FL	28 Melbourne	FL.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
_ Z ₽	Country	Zip	Country	8. This corporation owes or has paid the o	urrent year Intangible
24 324.	<u> </u>	29 32 935 3	0	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent	61 Name	10. Name and Address of New Registere	d Agent
94 RO	LCHRIST, FAY J 4 PINELAND DR. OCKLEDGE FL 32955		82 Street Addr8384 City	ess (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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					
40	Signature typed or printed name of regenered agent OFFICERS AND		logistered Agent signature requir	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	UD DIRECTORS IN 12
12.		DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	President. Fay Gilchrist	End Decemb	1.2 NAME		
STREET ADDRESS	Fay Gilchris-		1.3 STREET ADDRESS		
CITY-ST-ZIP	944 Pineland or.	32955	1.4 CITY-ST-ZIP		
TITLE	Secretary	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME	•	
STREET ADDRESS	gu- shun chen		2.3 STREET ADDRESS		
CITY-ST-ZIP	Rockledge. El.	12955	2. 4 CITY - ST - ZIP		•
TITLE	rockiege. pc.	DELETE	3.1 TITLE		Change Addition
NAME	,		3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TATLE		L DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		}
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		The same that th
TITLE	•	☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	·	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6 1 TITLE		Change Addition
NAME	'	OCCLIE	6.2 NAME		crange receion
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		ì
	L certify that the information supplied with	this filing does not qualify for t		Section 119.07(3)(i), Florida Statutes. I further	certify that the information