

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

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90112 034 ***150.00

DOCUMENT # P98000000242

1. Corporation Name
ECHO EXPO, INC.

Principal Place of Business
726 CENTRAL FLORIDA PARKWAY
#4
ORLANDO FL 32824

Mailing Address
726 CENTRAL FLORIDA PARKWAY
#4
ORLANDO FL 32824

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/02/1998

4. FEI Number
59-3486105

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 2316 NE Minnehaha

27 Suite, Apt. #, etc.

28 Vanconver WA

29 98665 30 USA

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME CANNARD, TINA A
STREET ADDRESS 5618 DEEP DALE DRIVE
CITY-ST-ZIP ORLANDO FL 32821

TITLE VD
NAME CANNARD, CHRIS D
STREET ADDRESS 5618 DEEP DALE DRIVE
CITY-ST-ZIP ORLANDO FL 32821

TITLE S
NAME HEALY, J. CHRIS
STREET ADDRESS 726 CENTRAL FLORIDA PARKWAY, STE. 4
CITY-ST-ZIP ORLANDO FL 32824

TITLE T
NAME STURGIS, BRIAN K
STREET ADDRESS 726 CENTRAL FLORIDA PARKWAY, STE. 4
CITY-ST-ZIP ORLANDO FL 32824

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME CANNARD, TINA
1.3 STREET ADDRESS 2316 NE Minnehaha
1.4 CITY-ST-ZIP VANLOUVER WA 98665

2.1 TITLE VD
2.2 NAME CHRIS CANNARD
2.3 STREET ADDRESS 2316 NE MINNEHABA
2.4 CITY-ST-ZIP VANLOUVER WA 98665

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Chris Cannard 2/1/99 503-234-1552

CR2E034 (11/98)