PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Kathering-Harris

Secretary of State

FILED Mar 02, 1999 8:00 am Secretary of State

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Principal Plac	e of Business		Mailing Address			- IN	UND TO SOM ENSON SOUS MOUSE	INCH ORDS UBSC	PO) ji satane ibiri	A1816 933) (34)	
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WESLEY CHAP	EL FL 33543	Y	VESLEY CHAPEL FL 33543				DO NOT WE	RITE IN THIS	SPACE		
						3. Date inco	orporated or Qualife	d			1
						01/15/		····			
	Place of Business	-	a. Mailing Address			4. FEI Num	348784	1.	<u> </u>	oplied For	}
Suite, Apt.	# etc	26	Suite, Apt. #, etc.							ot Applicable Additional	1
22	# , 0.0.	27	7			5. Certificate	of Status Desired			equired	}
City & Stat	le		City & State			1	Campaign Financing			May Be	
23			Zip Country			Trust Fund Contribution Added to Fees 8. This corporation owes the current year intangible					┥
Zip 24	Country	29	Zip	_	uy 	,	oration owes the cu	•	angibie [XYes	-□No	====================================
24	9. Name and Addres						d Address of New		_/		1
					Name					į	1
	SON, PEGI 25 S.R. 54 W.			1	32 Street Addr	ess (P.O. Box N	umber is Not Accep	table)			1
	SLEY CHAPEL FL 3354	43		},	33		· · · · · · · · · · · · · · · · · · ·				1
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					34 City			FL	.	Code	ł
11. Pursuent	to the provisions of Secti	ions 607.0502 and	607.1508, Florida Statutes, rida. Such change was auth of, Section 607.0505, Florid	, the abo	ove-named corp	oration submits	this statement for the	e purpose of	changing its	registered	ł
Olince of i	registered agent, or both, on familiar with, and acce	In the State of Fig.	riua. Such Change was auu				science, rinarous accor	spr une appoi	10110110 00 10	8.2.2.2	
ayen, i a	III (altinia), Mipi, and acce	pt the congations of	of, Section 607.0505, Florid	a Statut	es.						
SIGNATURE		_									
	Signature, typed or printed name	_	e if applicable. (NOTE: Re		es. geri signature require	d when reinstating)	S/CHANGES TO O	DATE		ORS IN 12	(98)
SIGNATURE	Signatura, typed or printed name of	of registered agent and till FICERS AND DIR	e if applicable. (NOTE: Re	ngistered A	geri signature require	d when reinstating)		DATE			(11/98)
SIGNATURE 12. TITLE NAME	Signature, typed or printed name OF Presiden	of registered agent and the FFICERS AND DIR	e if applicable. (NOTE: Re	13. 1.1 TITL 1.2 NAM	gerd signature require	d when reinstating)		DATE	ID DIRECTO	ORS IN 12	034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or privated name of OF PIRSIDEN DING	of registered agent and the FICERS AND DIR	e if applicable. (NOTE: Re ECTORS	13. 1.1 TITL 1.2 NAM 1.3 STR	perd algosture require E E E E E E E E E E E E E E E E E E E	d when reinstating)		DATE	ID DIRECTO	ORS IN 12	(2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY ST ZIP	Signature typed or presend name OF FIRESIDEN Degi Vivis 7320 Dog Wester	of registered against and the FFICERS AND DIR TON SON SON SON SON	ECTORS DELETE	1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY	gerd signature require E E E E E E E E T T T T T T T T T T T	d when reinstating)		DATE	ID DIRECTO	ORS IN 12	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature typed or presend name OF Presiden Degi Vivis 7320 Dog Wasle-1	or regarded agent and the FICER'S AND DIR	ECTORS DELETE 33544 OR DELETE	13. 1.1 TITL 1.2 NAM 1.3 STR	gerl alghature require E E E E E E T T T T T T T	d when reinstating)		DATE	D DIRECTO	DRS IN 12	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature speed or provide name OF PERSIDEN PERSIDEN 7320 POR WESTER	or repeased agent and the FICERS AND DIR SON SON SON SON SON SON SON SON SON SON	DELETE OELETE	13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM	gerl alghature require E E E E E E T T T T T T T	d when reinstating)	S/CHANGES TO O	DATE FFICERS AN	D DIRECTO	DRS IN 12	CR2E034 (11/98)
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