## 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 # P9800006438

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

03-02-1999 90086 030 \*\*\*150.00

ADVANC	ed Rehab 2000, Inc.										
Principal Place	e of Business	Mailing Address				s idiālīdās isa sa	FØJ 1ØJ11 ØJ111 ØJ	Bill Aklıı Balıı		11000	}#   #    #E
7570 GATES CIRCLE 7570 GATES CIRC											
SPRING HILL FL 34606 SPRING HILL FL 34606											
							O NOT WRI		SPACE		<del></del>
						Date Incorporated 01/21/1998	l or Qualifed				
2. Principal P	lace of Business	2a. Mailing Address			ام 4.	FEI Number	2010	4		Appli	ied For
21		26				59-348	306L	0		Not A	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certifcate of Statu	s Desired				ditional
22		27							Fee	Requ	uired
City & State		City & State			6. 1	Election Campaig	n Financing		\$5.0	)0 м	lay Be
23		28				Trust Fund Contri	bution		Add	ed to '	Fees
Zip	Country	Zip	Country	<i>(</i>	8.	This corporation of	wes the cur	rent year In		_	٦
24	25	29 3	30			Personal Property			Yes		]No
	9. Name and Address of Curre	nt Registered Agent		T-:-	10.	Name and Addre	ss of New I	Registered	Agent		
444	DE AMAZED		81	Name				,	• .		-
	RILAWYER		82	Street A	Address (P.	O. Box Number is	Not Accept	able)	-		
	ALMERIA AVENUE				<u> </u>			4.			
COH	IAL GABLES FL 33134		83					·			
			84	City					85 2	ip Co	de
	to the provisions of Sections 607.05	_						FL	<b>-</b>		
oπice or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was aut ations of, Section 607.0505, Florid	da Statutes	tne corpor	ration's boa	ard of directors. I	neroby acco	pt the appo			5(6)60
agent. I a SIGNATURE	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid ent and title if applicable. (NOTE: R	da Statutes Registered Age	5. 	ration s boa	instating)		DATE			
agent. I a SIGNATURE  12.	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R ND DIRECTORS	Registered Age	5. 	equired when rei			DATE	ND DIREC	CTOR	S IN 12
agent. I a SIGNATURE  12. TITLE	m familiar with, and accept the oblig  Signature, typed or printed name of registered ap  OFFICERS A	ations of, Section 607.0505, Florid ent and title if applicable. (NOTE: R	Registered Age  13.  1.1 TITLE	5. 	ration's boa	instating) DDITIONS/CHAN	IGES TO OF	DATE FICERS A		CTOR	
agent. I a SIGNATURE  12. TITLE NAME	m familiar with, and accept the oblig  Signature, typed or printed name of registered as  OFFICERS A  PTD  MOHAMED, EMADELDIN	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R ND DIRECTORS	Registered Age  13.  1.1 TITLE  1.2 NAME	nt signature rec	Quired when re	instating) DDITIONS/CHAN	IGES TO OF	DATE FICERS A	ND DIREC	CTOR:	S IN 12
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS	signature, typed or printed name of registered ag OFFICERS A PTD MOHAMED, EMADELDIN 7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R ND DIRECTORS	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE	nt signature rec	PTD  MOHL	instating) DDITIONS/CHAN AMED E1	IGES TO OF	DIN WAY C	ND DIREC	CTOR:	S IN 12
agent. I a SIGNATURE  12. IITLE NAME STREET ADDRESS CITY- ST- ZIP	Signature, typed or printed name of registered as OFFICERS A PTD MOHAMED, EMADELDIN 7570 GATES CIRCLE SPRING HILL FL 34606	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: F  ND DIRECTORS  DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	nt signature rec	A CONTROL OF THE CONT	instating) DDITIONS/CHAN	IGES TO OF	DIN WAY C	ND DIREC	CTOR:	S IN 12
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R ND DIRECTORS	Registered Age  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	nt signature rec	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIREC	CTOR:	S IN 12
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: F  ND DIRECTORS  DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	T ADDRESS	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIREC	CTOR:	S IN 12
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: F  ND DIRECTORS  DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	T ADDRESS	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIREC	CTOR:	S IN 12
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB	ations of, Section 607,0505, Florid ent and title if applicable. (NOTE: R  ND DIRECTORS  DELETE	Registered Ages  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S	T ADDRESS	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED E1	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECT SECTION OF S	CTOR:	S IN 12 Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: F  ND DIRECTORS  DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE	T ADDRESS	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIREC	CTOR:	S IN 12
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and title if applicable. (NOTE: R  ND DIRECTORS  DELETE	Registered Agents 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECT SECTION OF S	CTOR:	S IN 12 Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and title if applicable. (NOTE: R  ND DIRECTORS  DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECT SECTION OF S	CTOR:	S IN 12 Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florident and tille if applicable. (NOTE: FIND DIRECTORS DELETE	Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR Chan	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and title if applicable. (NOTE: R  ND DIRECTORS  DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECT SECTION OF S	CTOR:	S IN 12 Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florident and tille if applicable. (NOTE: FIND DIRECTORS DELETE	Registered Ages  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP ST ADDRESS ST-ZIP ST ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR Chan	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florident and tille if applicable. (NOTE: FIND DIRECTORS DELETE	Registered Ages  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE	T ADDRESS ST-ZIP ST ADDRESS ST-ZIP ST ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR Chan	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R  ND DIRECTORS  DELETE  DELETE  DELETE	Registered Ages  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR Chan	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE TITLE TITLE TITLE TITLE	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florident and tille if applicable. (NOTE: FIND DIRECTORS DELETE	Registered Ages  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R  ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R  ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and tille if applicable. (NOTE: R  ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 4.5 TITLE 5.2 NAME 5.3 STREE 5.3 NAME 5.3 STREE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR	CTOR:	S IN 12 Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and title if applicable. (NOTE: F  ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR Chan	CTOR:	S IN 12 Addition Addition Addition Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS A  PTD  MOHAMED, EMADELDIN  7570 GATES CIRCLE  SPRING HILL FL 34606  VSD  AMIN, IHAB  7570 GATES CIRCLE	ations of, Section 607,0505, Florid ent and title if applicable. (NOTE: F  ND DIRECTORS  DELETE  DELETE  DELETE	Registered Ages  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	A CONTROL S OF S PR	instating) DDITIONS/CHAN AMED EI G COMMEI ING HILL	IGES TO OF MADEL RCIAL (	DIN WAY C	ND DIRECTOR Chan	CTOR:	S IN 12 Addition Addition Addition Addition

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 ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President 1/11/99 (352) 596-1977