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 # P98000019359

1. Corporation Name SII FNT DIVF. INC.

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90128 002 ***150.00

O.C.C.T.	21121 11101								
Principal Plac	e of Business	Ma	iling Address				a telesten, tre tetel rittl entil entil delle es		
2457A HIAWAS	SSEE ROAD SUITE 326	245	7A HIAWASSEE ROAD	SUITE 326					
ORLANDO FL 32835 ORLANDO FL 32835							DO NOT WRITE IN TH	418 SPACE	
							3. Date Incorporated or Qualifed	IIS SPACE	
							02/23/1998		
2. Principal P	Place of Business	2a.	Mailing Address				4. FEI Number	Ap	plied For
21		26	_				59-349286	No.	t Applicable
Suite, Apt.	#, etc		Suite, Apt. #, etc				5. Certificate of Status Desired	\$8.75 ₽	
22		27					G. 65464.6	Fee Re	
City & Stat	te		City & State				6. Election Campaign Financing	\$5.00	
23		28					Trust Fund Contribution	Added t	o Fees
Zıp	Country Zip			Country			This corporation owes the current year		
24	25	29		30			Personal Property Tax	Yes	□No
	Name and Address of Curr	ent Regist	ered Agent		11	Name	10. Name and Address of New Register	a Agent	
CDE	ED DALE E			8	31	Name			
GREER, DALE E 2457A HIAWASSEE ROAD SUITE 326					32	Street Addi	ess (P.O. Box Number is Not Acceptable)		
		L	_ 						
ORLANDO FL 32835				8	33				
				8	34	City		. 85 Zip (Code
_				L			F		
11. Pursuant	to the provisions of Sections 607 0	502 and 60	07.1508, Florida Statut	es, the abo	ove-	named corp	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its pointment as re	registerea aistered
agent. La	registered agent, or both, in the ota am familiar with, and accept the obli	igations of,	Section 607 0505, Flo	inda Statute	es	ne corporati	on a soling of directors a more property to sept me up		J
SIGNATURE									
SIGNATURE	Signature, typed or printed name of releastered a	spent and fille if	applicable (NOTE	Registered Ar	qera s	signature require	DATE (buttersment)		
12.	OFFICERS	AND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS		
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CITY-ST-ZIP	ORLANDO FL 32819								
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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 WANE OF SIGNING OFFICER OR DIRECTOR

3-16-89 (407) 35/- 8440

CR2E034 (11/98