وينوجه فالبيدة

PROFIT
CORPORATION
ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000057819

THE NOTE ILLING LEE ALLEN MAI

JOHN KINTZLER, INC.

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90233 001 ***150.00

Principal Place of Business Mailing Address					F INDISAN (19 1930) IOILL ANTIL ANTI	1 38 1 W 1 1 1 1 1 1 1 1	****	
112 E. CONCORD ST. 112 E. CONCORD ST.								
ORLANDO FL 3		ORLANDO FL 32801			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	705		l
					06/29/1998			ı
Principal Place of Business 2a. Mailing Address					4. FEI Number	1	olied For	
21	26			59-3519649		Applicable	1	
Suite, Apt, #, etc.		Suite, Apt. #, etc.	¬ ' ' '		5. Certificate of Status Desired	5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
23		28	• -					
- Zip	Country	Zip	Cou	ntry:	8. This corporation owes the current year Intang	gible	2.	
24	25	29	30		- Gradient reports value		ίχ _{No}	ı
	9. Name and Address of Curre	nt Registered Agent			19. Name and Address of New Registered Ag	ent		
Var	TIPD JOUNE			B1 Name			j	l
KINTZLER, JOHN E 112 E. CONCORD ST.				82 Street Add	ress (P.O. Box Number Is Not Acceptable)			l
			<u> </u>				l	
l OHD	ANDO FL 32801			83				Į
)				84 City		85 Zip C	code	1
	<u> </u>				<u> </u>	ل_		l
11. Pursuant to the provisions of Sections 607.05 22 and 607.1508, Florida Statutes, the above-named office or registered attent or both, in the Starts of Florida. Such change was authorized by the congagent. I am familiar					poration submits this statement for the purpose of Ch on's board of directors. I hereby accept the appointm	anging its neni as reg	registered jistered	l
agent. I a	m familiar with and accept the oblig	ations of, Section 607.0505, Fig	rida Stati	ites.	3.1	,		i
SIGNATURE	De 1 de 1				3/1/	55_		l _
0.0,0,0	Signature typod or purious name of republied age			Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DC IM 12	8
12.		ND DIRECTORS	13. 1.1 III	<u> </u>		Change	Addition	CR2E034 (11/98)
TITLE	D /	□ oercie			•		J	4
NAME	KINTZLER, JOHN E		12 N	į.				္က
STREET ADDRESS	3030 EAGLET LOOP			REET ADDRESS				្តដ
CITY-ST-ZIP	ORLANDO FL 32837	☐ DELETE	2.1 TI	TY-ST-ZIP		Change	Addition	Ö
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NAME				REET ADDRESS				ĺ
STREET ADDRESS				1				ł
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STREET ADDRESS				TY-ST-ZIP			j	l
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NAME			1	REET ADDRESS			}	i
STREET ADDRESS				TY-ST-ZIP			}	
CITY-ST-ZIP			840	17-01-48				

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 sopplemental 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 13 or Block 13 if changed, or quality an address, with all other like empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED HAVE OF SIGNING OFFICER OR DIRECTOR

3/7/99

407-839-5080

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