PROFIT CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 25, 1999 8:00 am Secretary of State 04-25-1999 90019 001 \*2,550.00

<ol><li>Corporation</li></ol>	MENT # P98000( RGER CORP., INC.	080091								
Principal Place	of Business	Mailing Address				1   1   1   1   1   1   1   1   1   1	B-11			
20 NORTH ORA	INGE AVENUE #200	20 NORTH ORANGE AVEN	UE #200							
ORLANDO FL 3	2901	ORLANDO FL 32801				DO NOT WRITE	IN THIS	SPACE		
						3. Date incorporated or Qualifed				
						09/16/1998				
2 Principal P	lace of Business	2a, Mailing Address				4. FEI Number		Ap	olied For	
21	god of bookings	26				59-3532696	>	No	Applicable	
Suite, /vpt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 /		
22		27	7			5. Cerumate of Status Desires		Fee Re	quired	
City & State	e	City & State				6. Election Campaign Financing		\$5.00		
23		28			·	Trust Fund Contribution Added to Feas				
Zip	_ 551,			iry			ration owes the current year Intangible			
24	25 29 30				Personal Property Tax.   10. Name and Address of New Registered Agent					
<u> </u>	9. Name and Address of Current	Registered Agent		31 N	lame	10. Name and Address of New A	rgister ru -	gent		
ann	PORATION SERVICE COMPANY		Ι,	"  "	MINE					
	HAYS STREET		E	32 S	treet A Idi	ress (P.O. Bok Number is Not Acceptat	ole)			
	AHASSEE FL 32301-2525		63							
IALL	MINOSEL I'E SESSI-ESES		- 1	23						
ı			Ţē	34 C	ity		F1.	85 Zip C	ode	
						and a short to this statement for the s		hanging its	egistered	
11. Pursuant office or r agent. La	to the provisions of S⊇ctions 607.050: egistered agent, or both, in the State of m familiar with, and accept the obligati	and 607.1506, Florida Statiti If Florida. Such change was a ons of, Section 607.0505, Fig.	withorized t rida Statut	by the	corpor stic	poration submits this statement for the pon's board of tirectors. I hereby accept	the appoin	tment as req	Istered	
SIGNATURE						id when remetating,	DATE		·	<u>~</u>
42	Signature, typed or printed ni me of registered agen OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTO	RS IN 12	CR2E034 (11/98)
TILE	D STREET			LITTLE				Change	Addition	Ξ
NAME	HUGHES, DAVID H		1.2 NAM	1.2 NAME						×
STREET ADDRESS	AS MORTH ORMOR MENUE A	200	1.3 STREET ADDRESS		DRESS					
CITY-ST-ZIP	ORLANDO FL 32801		14 CIT		-					5
TITLE	D	DETELE	DELETE 21 TH					☐ Change	☐ Addition	O
NAME	HALL, A S JR.		22 NAM	E						
STREET ADDRESS	20 NORTH ORANGE AVENUE #200		2.3 STR	2.3 STREET ADDRESS						
CITY-ST-ZIP	ORLANDO FL 32801			2.4 CiTY-ST-ZIP						
TITLE				3.1 TITLE				Change	☐ Addition	
NAME	ZEPF, J S		3.2 NAM	3.2 NAME						
STREET ADDRESS	20 NORTH ORANGE AVENUE #200			EET ADI	DRESS					
CITY-ST-ZIP	ORLANDO FL 32801			3.4 CITY-ST-ZIP					T 4 13063 1	
TITLE	☐ DELETE		41 TITU	41 TIFLE		•		Change	Addition	
NAME			4.2 NA	Æ	1					
STREET ADDRESS			43 STR	EET AD	ORESS					1
CITY-ST-ZIP			4.4 C/TY	-ST-Z#	P					
TITLE	☐ DELETE			5.1 TITLE				Change	Addition	
NAME			5.2 NAV							
STREET ADDRESS			5.3 STR	EET ADO	DRESS					
CITY-ST-ZIP			5.4 CITY					F3.01	<b>—</b> • • • • • • • • • • • • • • • • • • •	
TITLE	☐ DELETE			E	}			Change	☐ Addition	ı
NAME			62 NAM		l					
STREET ADDRESS			6.3 STR		ľ					
CITY-ST-ZIP	L		B.4 CfTY				<del></del>	£ . 45 - 2 - 2 · ·	-1	
44 I boroby	positive that the informal on supplied with	this filing does not giblify to	r the exem	ation	stated in S	Section 119.07 3)(i), Florida Statutes. I	rurtner cart	iy that the if	HOBBITING	

I hereby certify that the intermation supplied with this face and that my signate in Security that annual report or suppliemental innual report is true and accurate and that my signate re-shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the results 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 of on a statistic ment with an address, with a lighter time empowered.

SIGNATURE: \_

AME OF SIGNING OFFICEL OR DIRECTOR