

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91289 035 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # <u>P 98000090974</u> 1. Entity Name <u>ORLANDO, WELCOME CTR AT SPENNO CHINA</u>					
Principal Place of Business <u>3000 Splendid China Blvd</u> <u>Kissimmee FL 34747</u>			Mailing Address <u>2419 E Commercial Blvd #100</u> <u>Plant, FL 33308</u>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <u>65-0871437</u>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <u>BLODIE, Gregory J. - ESQ</u> <u>100 W Cypress Cr Blvd #700</u> <u>Plant, FL 33309</u>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State <u>FL</u> Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)			FILE NOW!!! FEE IS \$150.00 After May 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>			\$5.00 May Be Added to Fees		
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>PD</u> <u>LAMBERT DANNY</u> <u>2419 E Commercial Blvd #100</u> <u>Plant, FL 33308</u>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>OFFICER</u> <u>HEYDEN CHRISTINA</u> <u>2419 E Commercial Blvd #100</u> <u>Plant, FL 33308</u>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>D</u> <u>VERRILLO JAMES</u> <u>2419 E Commercial Blvd #100</u> <u>Plant, FL 33308</u>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

13. 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 report or supplemental 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 11 or Block 12 if changed, or in an attachment with an address, with all other like empowered.

SIGNATURE: Christina Heyden Christina Heyden 4/25/01
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)