## 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 # P98000107727

1. Corporation Name

## **FILED** Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90181 044 \*\*\*150.00

ORLANDO FL 32825   DO NOT WRITE IN THIS SPACE	Applied For Not Applicable 68.75 Additional
Principal Place of Business  Mailing Address  312 EVERWOOD STREET  ORLANDO FL 32825  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  12/29/1998  2. Principal Place of Business  2a. Mailing Address  4. FEI Number  59 - 3549869  No  Suite, Apt. #, etc.  22  City & State  City & State  City & State  4. Flooting Campaign Financing  \$5,00	Applied For Not Applicable 68.75 Additional
ORLANDO FL 32825   DO NOT WRITE IN THIS SPACE	Applied For Not Applicable 88.75 Additional
DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  12/29/1998  2. Principal Place of Business  2a. Mailing Address  25	Applied For Not Applicable 88.75 Additional
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21	8.75 Additional
Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Re  City & State City & State \$5. Certificate of Status Desired \$5.00	
22 27 City & State 2 5 00	
City & State City & State & Election Campaign Financing Cannaign Financing Cannaign Financing	Fee Required ~ ~
	\$5.00 May Be
23 Trust Fund Contribution Added t	Added to Fees
Zip Country Zip Country 8. This corporation owes the current year Intangible	
24 25 29 30 Personal Property Tax. Yes	
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name	<u> </u>
LABRET, STEVEN M	
226 HILLCREST STREET  82 Street Address (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32801 83	
84 City FL 85 Zip (	i
	IS Zip Code
44. Duravant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above named comporation submits this statement for the purpose of changing its	nging its registered
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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 employered 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 the address, with all other like empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR