03-02-1999 90135 025 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

•	1999	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DIVISION OF CO	ORPORATIONS	03-02-1999 90135 025	5 ***150.00	
 Corporation 	MENT # S1 APPROACH PROP			- **			
Principal Place	of Business	Mai	iling Address				
5761 BIRD RD: MIANH FE 98155	i		BIRO RO. MPFL 33155		DO NOT WRITE IN THIS	SPACE	
20 8		- 05	•		3. Date Incorporated or Qualifed	<u> </u>	
					12/11/1990		ļ
2. Principal Pl	ace of Business		Mailing Address		4. FEI Number	Applied	d For
21 200	Pasa clena	Place 26 a	200 Pasad	exa Plac	<u>e</u> 65-0231921	Not Ap	plicable
Suite, Apt.			Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Addit	
22		27	_			Fee Require	
City & State	and El	28 (City & State	. F1	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fe	• }
Zip	Country		Zip	Country	8. This corporation owes the current year Inta	angible	
24 3280				50 USA	Personal Property Tax.	Yes D	No
	9. Name and Addres				10. Name and Address of New Registered /	\gent	
DDA	NOON OFFICEN F			81 Name			į
BRANDON, STEPHEN E					Address (P.O. Box Number is Not Acceptable)		
5761 BIRD RD: 02 MAMI FL 33155 83				∠ doc			
WITAN	NI FL 331 33"			83			}
				84 City		85 Zip Code	e
				00	tando FL	3280	
office or re	agistored agont or both	in the State of Florida	s Such change was auf	thorized by the corno	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appoin	:nanging its regi itment as regist€	ered
agent. I ar	m familiar with, and acce	pt the obligations of,	Section 607.0505, Florid	da Statutes.			
SIGNATURE	Signature, typed or printed name	of recustered agent and title if	applicable (NOTE: f	Registered Agent signature re	equired when reinstating) DATE		— Ì
12.		FFICERS AND DIREC	 	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS	IN 12
TITLE	D		☐ DELETE	1.1 TITLE		Change [Addition
NAME	BRANDON, WILLIAM	A E.		1.2 NAME			
STREET ADDRESS	5761 BIRD BD-			1.3 STREET ADDRESS	200 Pesachena Place		J
CITY-ST-ZIP	MHAMI FL 33 13 5			1.4 CITY-ST-ZIP	200 Florachena Place Orlando, Fl 32803		<u>. </u>
TITLE	D		☐ D€LETE	2.1 TITLE		☐ Change ☐	Addition
NAME	Brandon, Jeffre	Y L.		2.2 NAME			·
STREET ADDRESS	5761 BIRD RD			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33155			2.4 CITY-ST-ZIP			
TITLE	D		☐ DELETE	3.1 TITLE		Change	Addition
NAME	BRANDON, STEPHE	:N E.		3.2 NAME		àr.	ļ
STREET ADDRESS	5761 BIRD BD			3.3 STREET ADDRESS	200 Pasadony Place Orlando, FI-32803		
CiTY-ST-ZiP	MIAMI FL 33155		O DELETE	3.4. CITY-ST-ZIP	Orlando, FI Baxo3	Change [☐ Addition
TITLE			☐ DELETE	4.1 TITLE	•	□ Originge □	
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE			☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change [☐ Addition
NAME				5.2 NAME			
				5.3 STREET ADDRESS			<u>.</u>
STREET ADDRESS				5.4 CITY-ST-ZIP	₹		•
CITY-ST-ZIP TITLE			☐ DELETE	6.1 TITLE		☐ Change ☐	Addition
NAME			-	6.2 NAME		-	.

6.4 CITY-ST-ZIP 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.

6.3 STREET ADDRESS

STREET ADDRESS