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

SIGNATURE



Sandra B. Mortham

COR ANNU	PROFIT RPORATION JAL REPORT	Secret.	IRTMENT OF STATE B. Mortham ary of State CORPORATIONS	May 21 1998 8:00am Secretary of State		
	MENT # S21596 INDUSTRIAL, INC.	6 (9)		T TORINGTO MO TICAN TIDAL BILLO TORIO OF	II BIBK BIBK BIBK BIBK BIBK BIBK BIBK	
 						
Principal Place		Mailing Address			, 2121, 2121, 6161, 6151, 6121, 612(; 196;	
1230 HILLGRES	81	1230 HILLCREST SUITE 104				
ORLANDO FL	32903	ORLANDO FL 32803			IN THIS SPACE	<u>-</u>
				3. Date Incorporated or Qualified 12/27/1990		
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	#	26		59-3042963	Not Applicab	ole
Suite, Apt.	#. U (C	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State)	City & State		6. Election Campaign Financing	\$5.00 May Be	\dashv
23]		28	Country	Trust Fund Contribution	Added to Fees	
Zip 24	Country 25	2(p)	Country 30	This corporation owes or has pa Personal Property Tax due June		
	9. Name and Address of Current		130	10. Name and Address of New Re		\exists
	LD, ROBERT P		81 Name	—· · · · · · · · · · · · · · · · · · ·		
	O HILLCREST ST		82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)	
	te 104 .ando fl 32803		83			
UNL	ANDO PL 34003					
			84 City		FL 85 Zip Code	
office or re agent. Lar SIGNATURE	egistered agent, or both, in the State or familiar with, and accept the obliga	of Florida. Such change was trons of, Section 607.0505, F	authorized by the corporal lorida Statutes.	poration submits this statement for the patients to acception's board of directors. I heroby acceptions	ot the appointment as registered	a
12.	Signature: typied or printed name of registried age: OF LICERS ANI		III · Registered Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12	⊸કિ
TITLE	PSTD	DELETE	1.1 Title	Abotto Noto Andreas To Cittle	Change Addition	S S S S S S S S S S S S S S S S S S S
NAME	KOURI, GREGORY		1.2 NAME			25
STREET ADDRESS	1230 HILLCREST, STE. 105		1.3 STREET ADDRESS			ĬĔ
CITY-ST-ZIP TITLE	ORLANDO FL	DÈLETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	<u></u> ;;
NAME	HOLD, ROBERT P.	LJ VICEIL	2.1 THEE		Ent pliange Ent roulle	<i>"</i> ~
STREET ADDRESS	1230 HILLCREST, STE. 105		2.3 STREET ADDRESS			- 1
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY - ST - ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	an l
NAME CORECT ADDRESS			3.2 NAME 3.3 STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			3 3 STREET AUDRESS 3 4. CITY-ST-ZIP			
TITLE		DELETE	4 1 TITLE		Change Addition	on
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY-\$1-ZIP		Change Addition	
TITLE NAME		ריין מברכוב	5.1 TITLE 5.2 NAME		ר ביומוולים ל אמנונונ	<i>"</i> "
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-\$T-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition	on
NAME			6.2 NAME			
STREET ADDRESS	•		6.3 STREET ADDRESS			
14. I hereby c	ertify that the information supplied wit	th this filing does not qualify	6.4 CITY-\$1-ZIP for the exemption stated in	Section 119.07(3)(i), Florida Statutes. I	further certify that the information	n
indicated of officer or of Block 12 of	on this annual report or supplemental director of the corporation or the race or Block 13 if changed, or on an attack the changed of the control of the c	annual report is true and activer or trustee empowered to	curate and that my signatu execute this report as req	re shall have the same legal effect as it uired by Chapter 607, Florida Statutes;	made under oath; that I am an and that my name appears in	

FILED