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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S52672

(0)

ORLANDO WORLD FINANCIAL CORP.

FILED Mar 02 1998 8:00am Secretary of State

Principal Place of Business Mailing Address									- III	011019 181 81110 11018 01111 18011			JII BIBII JOBI	
725 N MAGNOLIA AVE 725 N MAGNOLIA AVE ORLANDO FL 32803 ORLANDO FL 32803														
										DO NOT WRITE IN THIS SPACE				
										Incorporated or Qualifie	d			
2, Principal Place of Business 2a, Mailing Address									4. FEIN	15/1991			nulical Cos	
2. Principal Place of Business				26					I	-3072999) <u> </u>	pplied For lot Applicable	
	Suite, Apt	#, etc.	<u></u>		Suite, Apt. #, etc.				T			- + -	Additional	
22				27	27				5. Certi	ficate of Status Desired		·	beriupel	
City & State				City	City & State				6. Elect	ion Campaign Financing		\$5.00	May Be	
23				28					Trust	Fund Contribution		Added	to Fees	
-	Zip				Zip Country			8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes A No						
24 25 29 30 30 2										onal Property Tax due Ju e and Address of New			<u>4 No</u>	
								Name						
STONE, STEPHEN M. 725 NORTH MAGNOLIA AVENUE						-	_	6)	Address (P.O. Box Number is Not Acceptable)					
ORLANDO FL 32803						82		Street Addre	ess (P.O. B	ox Number is Not Accep	(able)			
!	V.,		02000			83	1							
							+	City				. 85 Zip	Code	
						84		Oity			F	L		
11.	office or r	egistered ac	ions of Sections 607 jent, or both, in the S th, and accept the of	tate of Florida St	ich change was	authorized b	y ti	named corpo he corporation	oration sub on's board	mits this statement for the of directors. I hereby acc	e purpose cept the a	of changing appointment as	its registered s registered	
	NATURE		an, and accept the ci	onganoria or, occ	1.511 001 .0000, 11	orda outato								
310	MATURE	Signature typed	or printed name of registerer			TE Registered Ag	onl	signature require		·	DATE			
12.		_	OFFICERS	AND DIRECTOR	·	13.		, , , , , , , , , , , , , , , , , , , 	ADDIT	IONS/CHANGES TO OF	FICERS A			
TITLE		PD	ON BODOED		☐ DELET E	1.1 TITLE						L Change	Addition	
NAME	1		ON, RODGER			1.2 NAME								
ADL AND		ORLAND	iagnolia ave				1.3 STREET ADDRESS							
CITY-	-ST-ZIP	D	O FL		K DELETE	1.4 CITY-: 2.1 TITLE	ST-	ZIP				Change	Addition	
1		VAN, AL	EDEN		A) occere	2.1 MAME						onango		
		IAGNOLIA AVE				2.3 STREET ADDRESS								
	-ST-ZIP	ORLAND				2.4 CITY-		T T						
TITLE		ST			☐ DELET E	3.1 TITLE	<u> </u>		/T/D/\			Change	Addition	
NAME	:	STONE.	STEPHEN M			3.2 NAME		St	one.	Stephen M.				
STREE	REET ADDRESS 725 N MAGNOLIA AVE			3.				25 N.	Magnolia A	ve.				
CITY-	-ST-ZIP	ORLAND	O FL			3.4. CITY-	ST-	ZIP Or	lande	o, FL 32803				
TITLE					☐ DELETE	4.1 TITLE						Change	Addition	
NAME	:					4. 2 NAME								
STREE	ET ADDRESS					4.3 STREE								
-	ST-ZIP				Deceme	4.4 CITY-	ST-	ZIP				Change	Addition	
TITLE					☐ DELET e	5.1 TITLE						L Change	Addition	
NAME						5.2 NAME		ADDECC						
l	ET ADDRESS					5.3 STREET		1						
	ST-ZIP				DELETE	5.4 CITY-5	51-	ZIP				Change	Addition	
TITLE	- 1					6.2 NAME						r ⊃ ouende	Audition	
NAME	ET ADDRESS					6.3 STREE	T A T	INRESS						
į .	.et. 7ID					64 CITY-		i						

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, of on an attachment with an address.