PROFIT ORPORATION NUAL REPORT	E AFTER I	FLORIDA DEPA Sandra I	RTMENT OF STATE B. Mortham		FILI 22 199	8 8:
1998 Secretary of State DIVISION OF CORPORA			•		ecretary	01 3
JMENT # S807	38	(5)				
BRATION FINANCE COMP	PANY, INC.				(8), 818() 8181 618) 8881 8181	
*						
ace of Business A VISTA DR.	-) Address OUTH BUENA VIS		e an fraita an thria mirae subma ambra	(Å) i D3Å41 A1A11 A1A14 D4D41 ALÅ1	II MIMII INTE
n vista dh. }, N. *\ Vista FL 32830	BURB	ANK CA 91521-058		DO NOT WRITE IN THIS SPACE		
N VIÐTA FL 3203U	US			3. Date incorporated or Qualified		
Place of Business	20 Ma	iling Address		09/17/1991 4. FEI Number		plied For
	26			59-3125101	No	ot Applicable
t. #, etc.	27	to, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 / Fee Re	
ate		/ & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00	
Country 25	Zip 29		Country 30	8. This corporation owes or has p Personal Property Tax due Jun		angible 8 No
9. Name and Address of Cu PPOLO, FRANK S.		d Agent	B1 Name	10. Name and Address of New R		
375 BUENA VISTA DR. TH FLOOR NORTH			62 Street Add 63 64 City	dress (P.O. Box Number is Not Accepta	85 Zin (Code
375 BUËNA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380	.0502 and 607.11 State of Llorida. Se bligations of, Se	508, Florida Statu juch change was ction 607.0505, Fl	63 84 City		FL 85 Zip (
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 A for the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the o			63 84 City	poration submits this statement for the ation's board of directors. I hereby acco	FL 85 Zip (
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 At to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the o		inable (NO	83 84 City tes, the above-named co authorized by the corpora lorida Statutes.	poration submits this statement for the ation's board of directors. I hereby acco	FL 85 Zip (purpose of changing it ept the appointment as	is registered registered
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The to the provisions of Sections 607 registered agent, or both, in the S arm familiar with, and accept the of Signature, typed or ponted name of registere OFFICERS S PITT, LAWRENCE B	ed agent and little if app	linatuk (NK) RS	B3 B4 City Ios, the above-named co authorized by the corporatorida Statutes. It-flegistered Agent signature requ 13. 1.1 TITLE 1.2 NAMI	rporation submits this statement for the ation's board of directors. I hereby acco ured when reinstaing)	FL 85 Zip 0 purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR	s registered registered
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 it to the provisions of Sections 607 registered agent, or both, in the S arm familiar with, and accept the of Signature, typed or ponted name of registere OFFICERS S PITT, LAWRENCE B	ed agent and little if app	linatuk (NK) RS	B3 B4 City Ios, the above-named co authorized by the corpor- lorida Statutos. It-flegistered Agent signature requ 13. 1.1 TITLE 1.2 NAMI 1.3 STREET ADDRESS	rporation submits this statement for the ation's board of directors. I hereby acco ured when reinstaing)	FL 85 Zip 0 purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR	s registered registered
75 BUENA VISTA DR. TH FLOOR NORTH IXE BUENA VISTA FL 32380 t to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Bignature, typed or ponted name of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA FL D	ed agent and little if app	linatuk (NK) RS	B3 B4 City Ites, the above-named co authorized by the corpor- lorida Statutes. It-flegistered Agent signature req- 13. I.1 TITLE 1.2 NAMI 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE	rporation submits this statement for the ation's board of directors. I hereby acco gred when reinstaing) ADDITIONS/CHANGES TO OFF	FL 85 Zip 0 purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR	s registered registered
75 BUENA VISTA DR. TH FLOOR NORTH IXE BUENA VISTA FL 32380 1 to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Signature, hyped or ponted name of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST.	ed agent and little if app	ieable (NO 1S DELETE	B3 B4 City Ids, the above-named collocities authorized by the corporatorida Statutes. It-ftegistered Agent signature requirement 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY_ST-ZIP 2.1 THLE 2.2 NAME 2.3 STREET ADDRESS	poration submits this statement for the ation's board of directors. I hereby acco gred when reinstating) ADDITIONS/CHANGES TO OFF	FL 85 Zip (purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR Change	IS IN 12
ST BUENA VISTA DR. H FLOOR NORTH AKE BUENA VISTA FL 32380 AKE BUENA VISTA FL 32380 A to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the o Signature, byped or penilsd name of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. S00 S BUENA VISTA ST. BURBANK CA	ed agent and little if app	In ADA (NU)	B3 B4 City Ites, the above-named co authorized by the corpora torida Statutes. II- Registered Agent signature rege 13. I.1 TITLE 12 NAMI 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP 21 THLE 22 NAME 23 STREET ADDRESS 2.4 CITY - ST-ZIP	rporation submits this statement for the ation's board of directors. I hereby acco gred when reinstaing) ADDITIONS/CHANGES TO OFF	FL 85 Zip 0 Purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR Change	IS IN 12
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 A A A A A A A A A A A A A A A A A A A	ed agent and little / agen	ieable (NO 1S DELETE	B3 B4 City Ites, the above-named co authorized by the corpora torida Statutes. Iter fregistered Agent signature requ 13. 1.1 TITLE 1.2 NAMI 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP 21 TITLE 22 NAMI: 2.3 STREET ADDRESS	poration submits this statement for the ation's board of directors. I hereby acco gred when reinstating) ADDITIONS/CHANGES TO OFF	FL 85 Zip (purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR Change	IS registered registered IS IN 12 X Addition
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The to the provisions of Sections 607 registered agent, or both, in the S arm familiar with, and accept the of Signature, hyped or provide liarre of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L	ed agent and little / agen	In ADA (NU)	83 84 City Itos, the above-named collocited by the corport torida Statutes. It-fregistered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	proration submits this statement for the ation's board of directors. I hereby acco pred when reinstating) ADDITIONS/CHANGES TO OFF 32830 91521	FL 85 Zip 0 Purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR Change	IS IN 12
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The to the provisions of Sections 607 registered agent, or both, in the S arm familiar with, and accept the of Signature, hyped or provided harrie of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA AR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L 200 CELEBRATION FL ASD	ed agent and little / agen	In ADA (NU)	83 84 City Ites, the above-named co authorized by the corpor- torida Statutes. 11 13. 1.1 1.3 STREET ADDRESS 1.4 21 21 21 21 10 21 1.1 1.2 NAME 1.3 STREET ADDRESS 2 2.1 2.1 2.1 2.1 2.3 STREET ADDRESS 2.4 3.1 3.1 3.3 3.3 3.4 CITY - S1 - ZIP 3.1 3.3 3.4 CITY - S1 - ZIP 3.1 3.1 3.3 3.4 CITY - S1 - ZIP 4.1	poration submits this statement for the ation's board of directors. I hereby acco gred when reinstating) ADDITIONS/CHANGES TO OFF	FL 85 Zip 0 Purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR Change	IS IN 12
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Signature, hyped or pented harre of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L 200 CELEBRATION FL ASD REED, MARSHA L. 500 D BUENA VISTA ST.	ed agent and little / agen	Incadak (NO) TS DELETE DELETE DELETE	83 84 City Ios, the above-named collocited by the corport forida Statutes. In Tregistered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	proration submits this statement for the ation's board of directors. I hereby acco pred when reinstating) ADDITIONS/CHANGES TO OFF 32830 91521	FL 85 Zip (purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR Change Change Change	IS registered registered IS IN 12 X Addition
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Signature, hyped or penilsd name of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L 200 CELEBRATION FL ASD REED, MARSHA L. 500 BUENA VISTA CT	ed agent and little / agen	DELETE	B3 B4 City Ites, the above-named co authorized by the corpor- torida Statutes. II- Registered Agent signature requires. 13. 1.1 TITLE 1.2 NAMI 1.3 STREEL ADDRESS 1.4 CITY - ST-ZIP 2.1 TITLE 2.8 STREEL ADDRESS 2.4 CITY - ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREEL ADDRESS 3.4 CITY - ST-ZIP 4.1 TITLE 4.2 NAME 3.3 STREEL ADDRESS 3.4 CITY - ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREEL ADDRESS 3.4 CITY - ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREEL ADDRESS 4.4 GITY - ST-ZIP	proration submits this statement for the ation's board of directors. I hereby acco pred when reinstating) ADDITIONS/CHANGES TO OFF 32830 91521	FL 85 Zip (epurpose of changing it ept the appointment as DATE ICERS AND DIRECTOR ICERS AND DIRECTOR Change Change Change	IS registered registered IS IN 12 X Addition
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Signature, typed or ponted name of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L 200 CELEBRATION FL ASD REED, MARSHA L. 500 S BUENA VISTA ST BURBANK CA T OUIMET, MATTHEW A.	ed agent and little / agen	Incadak (NO) TS DELETE DELETE DELETE	B3 B4 City Ites, the above-named co authorized by the corporatorial statutes. II- Registered Agent signature requires. 13. 1.1 TITLE 1.2 NAMI 1.3 STREEL ADDRESS 1.4 CITY ST-ZIP 2.1 TITLE 2.2 NAME 3.3 STREEL ADDRESS 2.4 CITY - ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREEL ADDRESS 3.4 CITY - ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREEL ADDRESS	rporation submits this statement for the ation's board of directors. I hereby acco wred when reinstaing) ADDITIONS/CHANGES TO OFF 32830 91521	FL 85 Zip (purpose of changing it ept the appointment as DATE ICERS AND DIRECTOR Change Change Change	IS registered registered IS IN 12 X Addition
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Signature, typed or ponted name of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L 200 CELEBRATION FL ASD REED, MARSHA L. 500 S BUENA VISTA ST BURBANK CA T OUIMET, MATTHEW A.	ed agent and little / agen	DELETE	B3 B4 City Itos, the above-named co authorized by the corporatorial Statutes. It-ftegistered Agent signature required 13. 11-ftegistered Agent signature required 13. 11-ftegistered Agent signature required 13. 11.1 TITLE 12.NAME 13.STREET ADDRESS 14.0TY_ST_ZIP 21.1 TITLE 22.NAME 23.STREET ADDRESS 2.4 CITY_ST_ZIP 31.1 TITLE 32.NAME 33.STREET ADDRESS 34. CITY_ST_ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY_ST_ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	rporation submits this statement for the ation's board of directors. I hereby acco wred when reinstaing) ADDITIONS/CHANGES TO OFF 32830 91521	FL 85 Zip (epurpose of changing it ept the appointment as DATE ICERS AND DIRECTOR ICERS AND DIRECTOR Change Change Change	IS registered registered IS IN 12 X Addition
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 A it to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Bignature, hyped or ponted name of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. 500 S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L 200 CELEBRATION FL ASD REED, MARSHA L. 500 S BUENA VISTA ST BURBANK CA T OUIMET, MATTHEW A.	ed agent and little / agen	DELETE	B3 B4 City Ites, the above-named co authorized by the corpor- forida Statutes. II- Registered Agent signature requires. 13. 1.1 TITLE 1.2 NAMI 1.3 STREEL ADDRESS 1.4 CITY - ST-ZIP 2.1 TITLE 2.8 STREEL ADDRESS 2.4 CITY - ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREEL ADDRESS 3.4 CITY - ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREEL ADDRESS 3.4 CITY - ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREEL ADDRESS 4.4 CITY - ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREEL ADDRESS	rporation submits this statement for the ation's board of directors. I hereby acco ired when reinstaing) ADDITIONS/CHANGES TO OFF 32830 91521 91521	FL 85 Zip (epurpose of changing it ept the appointment as DATE ICERS AND DIRECTOR ICERS AND DIRECTOR Change Change Change	IS registered registered IS IN 12 X Addition
375 BUENA VISTA DR. TH FLOOR NORTH AKE BUENA VISTA FL 32380 The to the provisions of Sections 607 registered agent, or both, in the S arm familiar with, and accept the of Bignature, hyped or ponted time of registere OFFICERS S PITT, LAWRENCE B 1375 BUENA VISTA DR LAKE BUENA VISTA DR LAKE BUENA VISTA FL D LITVACK, SANFORD M. SOO S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L SOO S BUENA VISTA ST. BURBANK CA PD SHINN, ROBERT L SOO S BUENA VISTA ST. BURBANK CA T OUIMET, MATTHEW A. 1375 BUENA VISTA DR.	ed agent and little / agen	Incatole (NO) TS DELETE DELETE DELETE DELETE DELETE DELETE	B3 B4 City authorized by the corporatorial statutes. It - ftegistered Agent signature required by the corporatorial statutes. 11 - ftegistered Agent signature required by the corporatorial statutes. 13. 11 - ftegistered Agent signature required by the corporatorial statutes. 13. 14 - ftegistered Agent signature required by the corporatorial statutes. 13. 14 - ftegistered Agent signature required by the corporatorial statutes. 14 - ftegistered Address 14 - ftegistered Address 14 - ftegistered Address 2 - A AME 2 - A CITY - S1 - ZIP 3 - TITLE 3 - STREET ADDRESS 3 - CITY - S1 - ZIP 4 - TITLE 4 - STREET ADDRESS 4 - GITY - S1 - ZIP 5 - TITLE 5 - STREET ADDRESS 5 - STREET ADDRESS 5 - STREET ADDRESS 5 - A CITY - S1 - ZIP	rporation submits this statement for the ation's board of directors. I hereby acco ired when reinstaing) ADDITIONS/CHANGES TO OFF 32830 91521 91521	FL 85 Zip (epurpose of changing it ept the appointment as Image: Change DATE Image: Change ICERS AND DIRECTOR Image: Change ICERS AND DIRECTOR Image: Change Image: Change Image: Change Image: Change Image: Change Image: Change Image: Change	IS registered registered IS IN 12 IX Addition