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

PROFIT RPORATION IUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

MENT # S87080 MAL AGENTS NETWORK, INC. (5)

FILED

Apr 27 1998 8:00

Secretary of Sta

ace of Business	Mailing Address			DIL BIBI DIDI DIBI DIBI IDDI
A DRIVE	2273 ALAQUA DRIVE			
FL 32779	LONGWOOD FL 32779			
	US		DO NOT WRITE IN THIS SPACE	
사용 : 			3. Date Incorporated or Qualified	
The second Division of	1 0 14 days 6 days	·	10/14/1991 4. F.E.I Number	TAnulad Far
Place of Business	2a. Mailing Address			Applied For Not Applicable
∑ ø , etc.	26 Suite, Apt. #, etc.		59-3087982	\$8.75 Additional
E. Store	[27]		5. Certificate of Status Desired	Fee Required
iàte	City & State		6. Election Campaign Financing	\$5.00 May Be
	28		Trust Fund Contribution	Added to Fees
Country	Zip	Country	8. This corporation owes or has paid the d	current year Intangible
25		30	Personal Property Tax due Jurie 30	Yes 🗷 No N/ A
	Current Registered Agent		10. Name and Address of New Registere	d Agent
TH ANN PEDIGO		81 Name		
78 ALAQUA DRIVE		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
NOWOOD FL 32779			·	
		83		
		84 City		85 Zip Code
R.:.			poration submits this statement for the purpose stion's board of directors. I hereby accept the a	<u>L </u>
Signature, typed or printed name of region OFFICE	sterod agent and tria of applicable (NOTE RS AND DIRECTORS	Registereo Agentis gnature requ	DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
T CHOST	DLLETE	1.1 THUE		Change Addition
PEDIGO, RUTH ANN		1.2 NAME		
22/3 ALAUUA URIVE		1.3 STREET ADDRESS		
LONGWOOD FL		14 CITY ST 7IP		
PD	DELFTE	2.1.11011		Change Addition
PEDIGO, JAMES P		2.2 NAME		
2273 ALAQUA DRIVE		2.3 STREET ADDRESS		
LONGWOOD FL		2 4 CITY S1 ZIP		Change Addition
LONGWOOD FL	DELETE	3.1 IMLE		Change Addition
		3.2 NAME		•
		3.3 STHELL ADDRESS		
3.0	DELITIE DELITIE	34 CHY-SE 7F9 41 HTLF		Change Addition
		4 2 NAME		
		4 3 STREET ADDRESS		
		4.4 CITY - S1 - ZIP		
**************************************	DELFTH	51 III E		Change Addition
	 ·	5.2 NAME		
		5.3 STREET ADDRESS		
# ^T : 21 11		5.4 CHY+ S1+ ZIP		
	DELETE	6 1 TITLE		Change Addition
		6.2 NAME		
us de la companya de		6.3 STREET ADDRESS		
30 		6.4 City St. ZIP		

cortify 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 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 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 12 or Block 13 if phanged, or on an attactory introduced.

407-333-333