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 # V15

(3)

JOSEPH GIAN CORPORATION Principal Place of Business Mailing Address C/O HYATTT REGENCY GRAND CYPRESS C/O HYATTT REGENCY GRAND CYPRESS 1 GRAND CYPRESS BLVD I GRAND CYPRESS BLVD ORLANDO FL 32819 DO NOT WRITE IN THIS SPACE ORLANDO FL 32819 3. Date Incorporated or Qualified 02/20/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3107361 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 Yes Yes 25 30 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GIAN JOSEPH** C/O HYATT REGENCY GRAND CYPRESS Street Address (P.O. Box Number is Not Acceptable) 1 GRAND CYPRESS BLVD 83 ORLANDO FL 32819 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Lorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, types or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 1.1 TITLE GIAN, JOSEPH NAME 1.2 NAME **5033 DELVIN COURT** STREET ADDRESS 1.3 STREET ADDRESS **ORLANDO FL** CITY+ST-ZIP 1.4 City-St-7iP DELETE TITLE Đ٧ Change Addition 2.1 TITLE GIAN. HELEN Y NAME 2.2 NAME **5033 DELVIN COURT** STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE ☐ Change TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-7/P TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP TITLE ☐ DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 coreiver or trustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607 and that my name appears in the supplemental products.

SIGNATURE: Alley MUNA Thanks passe

3/20/98

407-239-3894

FILED

Mar 24 1998 8:00am

Secretary of State