

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V18012 1. Corporation Name MUNIAN DEVELOPMENTS, INC.,			
Principal Place of Business 7421 CLARCONA OCOEE RD., ORLANDO FLORIDA FL 32818		Mailing Address 7421 CLARCONA OCOEE RD., ORLANDO FL 32818	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 03/03/1992		3a. Date of Last Report 1995	
4. FEI Number 59-311-6624		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			
9. Name and Address of Current Registered Agent HORACE M. SAHAI 7421 CLARCONA OCOEE RD., ORLANDO FLORIDA 32818		10. Name and Address of New Registered Agent 81 Name FRANKLIN O. MUNIAN 82 Street Address (P.O. Box Number is Not Acceptable) 7421 CLARCONA OCOEE ROAD 83 ORLANDO 84 City FLORIDA 85 Zip Code 32818	
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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE: <u>Franklin O. Munian</u> FRANKLIN O. MUNIAN DIRECTOR/PRESIDENT/SECY. MAY 1/96 DATE: MAY 1/96			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 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 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	
D/S/T HORACE M. SAHAI 7421 CLARCONA OCOEE RD., ORLANDO FL 32818		D/P/S FRANKLIN O. MUNIAN 7421 CLARCONA OCOEE RD., ORLANDO, FL 32818 D/V RAUEL W. MUNIAN 7421 CLARCONA OCOEE ROAD, ORLANDO, FL 32818 T RICARDO R. MUNIAN 7421 CLARCONA OCOEE RD., ORLANDO, FL 32818	
		300001829003 05/20/96-01038-023 ***225.00	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.			
SIGNATURE: <u>Franklin O. Munian</u> D/P/S FRANKLIN O. MUNIAN (407) 296-2002 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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