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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V18730

(4)

ARRINGTON, MARTINEZ & CO., P.A.

FILED Apr 03 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address			A DIGIT CHELL BIEN BIEN BIEN BIEN	
1035 S. SEMORAN BLVD.		1035 S. SEMORAN BLVD.				
SUITE 1011		SUITE 1011		DO NOT WRITE IN	THIC COACE	
WINTER PARK US	FL 32792	WINTER PARK FL 32792 US		DO NOT WRITE IN 3. Date Incorporated or Qualified	IMIS SPACE	
00		Vo		03/01/1992		
2. Principal P	lace of Business	2a. Mailing Address		4. FE! Number	Applied For	
21 2487	1 HUMA AVE.	26 2487 AKAN	A AUS.	59-3039665	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		_	CR 75 Additional	
22 8017		27 20/05 2	190	5. Certificate of Status Desired	Fee Required	
City & State		City & State	BOU E	6. Election Campaign Financing	\$5.00 May Be	
23 W/W		28 WINTER 1	THE FO			
24 32 T	792 25 ORANGE	20 2792	Country 30 APANGE	 This corporation owes or has paid the Personal Property Tax due June 30. 	ne current vear Intangible Yes No	
24 00	9. Name and Address of Current	<u> </u>	30 00000	10. Name and Address of New Registe		
ARRINGTON, J. LEE, III 81 Name						
ARRE À CEMONANI BLUD						
STE 1011			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
WINTER PARK FL 32792			83			
WINTER FARN I C 02/92						
			84 City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Fixrida 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	Signature, typed or printed name of registered agent	and lifte if applicable (NOTE	Registered Agent & gnature requ	uired when reinstating) D.	MTE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	VP	☐ OELETE	1.1 TITLE		Change Addition	
NAME	ARRINGTON, J. LEE, HI		1.2 NAME	4	- 45	
STREET ADDRESS	1035 S. SEMORAN BLVD #101	1	1.3 STREET ADDRESS	2487 ALONA AUG, SUI	R 200	
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY - ST - ZIP	NINTER PARK FL	. 32772	
TITLE	P	☐ DELETE	2 1 11TLE	•	Change Addition	
NAME	MARTINEZ, JORGE L		2.2 NAME	2487 ALANA AUB, S	54- 3-	
STREET ADDRESS	1035 S. SEMORAN BLVD. #101	1	2.3 STREET ADDRESS	247 Hearn Ave,	100 200	
CITY-ST-ZIP	WINTER PARK FL		2. 4 CITY - ST - ZIP	VINTER PARK FL	34796	
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME		}	
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME		ļ	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		DOLETE	4 4 CITY - ST - ZIP			
TITLE		☐ DELETE	5 1 THILE		Change Addition	
NAME	i		5.2 NAME		ļ	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>	DELETE	5.4 CITY - ST - ZIP		Change Addition	
TITLE	- w -	□ L DETELE	6.1 TITLE		FT CHANGE FT MOUITON	
NAME ATTEST ADDRESS			6 2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	artify that the information supplied with	this filing does not qualify for	the exemption stated in	n Section 119 07(3)(i) Florida Statutes I fudb	per cortify that the information	
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 empwered 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 odress.						