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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 02 1997 8:00am

|   | 1997                             |             |                        | Secretary of State DIVISION OF CORPORATIONS                      |               |                           |               | Secretary of State |  |                                |                                    |                    |   |
|---|----------------------------------|-------------|------------------------|--|---------------|---------------------------|---------------|--------------------|--|--------------------------------|------------------------------------|--------------------|---|
| DOCUN<br>1. Corporation<br>EAST CO                              | MENT :<br>OAST AUT               |             | 62831<br>P.            | (5   | )             |                           |               |                    | J ADAM ANJAN JIHKA MÉM UMAA  | #11 <b>41</b> #4 <b>41 #</b> 4 | SH BITH BITH A                     | LĀNI BIRKI I       | 1( <b>6</b> 4) 4 <b>0</b> 11            |
|   |                                  |             |                        | 41.5 4.11.   |               |                           |               |                    |  |                                |                                    |                    |   |
| Principal Place of Business  266 PARK AVE. LONGWOOD FL 32750 US |                                  |             |                        | Mailing Address<br>266 PARK AVE.<br>LONGWOOD FL 32750-5128<br>US |               |                           |               |                    |  | ************                   | #10 #1941 <b>0</b> 1917 <b>9</b> 1 |                    |   |
|   |                                  |             |                        |  |               |                           |               |                    | <ol> <li>Date Incorporated or Qua<br/>09/04/1992</li> </ol>  | lified                         | 3a. Date of<br>07/16/1             |                    | port                                    |
| 2. Principal Pl   | lace of Busine                   | :SS         |                        | 2a. Mailirig Addre   | ess           |                           |               |                    | 4. FEI Number  |                                |                                    | Apr                | olied For                               |
| Suite, Apt  | # etc.                           |             |                        | 26 Suite, Apt #,   | etc.          |                           | <del></del>   |                    | 59-3140699   |                                | \$t                                |                    | Applicable<br>dditional                 |
| 22  | , , ,                            |             |                        | 27   |               |                           |               |                    | 5. Certificate of Status Desir   | ed .                           |                                    | Fee Rec            |   |
| City & State  | 0                                |             |                        | City & State   |               |                           |               |                    | 6. Election Campaign Finan<br>Trust Fund Contribution  |                                |                                    | 5.00 i<br>Added to |   |
| Zip   |                                  | Country     | +                      | Zφ   |               | Country                   |               |                    | 8. This corporation has liabi  |                                |                                    |                    | 199.032.                                |
| 24  | 25 9. Name and Address of Curren |             |                        | 29 30 30 1 Registered Agent                                      |               |                           |               | 1                  | Florida Statutes Yes No  10. Name and Address of New Registered Agent  |                                |                                    |                    |   |
| PED   | NGREE, RICI                      |             |                        |  |               | 81                        | Name          |                    |  |                                |                                    |                    |   |
|   | PARK AVEN                        |             | <b>7</b> 11            |  |               | 82                        | Street        | Addres             | s (P.O. Box Number is Not Ac   | centable                       | <u> </u>                           |                    |   |
| LON   | igwood fl                        | 32750       |                        |  |               |                           |               |                    |  |                                | ,                                  |                    |   |
|   |                                  |             |                        |  |               | 83                        |               |                    |  |                                |                                    |                    |   |
| •   |                                  |             |                        |  |               | 84                        | City          |                    | · · · · · · · · · · · · · · · · · · ·  |                                | FL 85                              | Zip C              | ode                                     |
| 11. Pursuant t  | to the provision                 | ns of Secti | ions 607 0502 a        | nd 607 1508 Florid   | la Statutes   | the above                 | -named        | corpor             | ation submits this statement for   | or the pur                     |                                    | naina its          | registered                              |
| office or n   | egistered ago                    | nt, or both | , in the State of I    | Florida Such chan  | ge was auti   | horized by                | the corp      | poratio            | ation submits this statement for some statement of directors, I hereby the statement is the statement of the | accept                         | the appointm                       | ient as r          | egistered                               |
| SIGNATURE   | III laitilyai witi               | 3 10 2      | p) the obligation      | Policies de  | מבנ ע         | JULIC                     | $\overline{}$ | 2                  | A CINTAL   | <u>बाउपा</u>                   | वि                                 |                    |   |
|   | Syrator Typerin                  |             | of registered agent ar |  |               | egist red Ape             |               | required           | when reinstating)  | 45-11                          | DATE                               |                    |   |
| 12.   |                                  | OF          | FICERS AND D           | IRECTORS DE  | ) ETE         | 13.                       |               | r                  | ADDITIONS/CHANGES TO   | OFFICE                         |                                    | ECTORS<br>Change   | S IN 12 Addition                        |
| TITLE<br>NAME   | D<br>Pedigree                    | : DICHAE    | ST D III               |  | LLIL          | 1.1 TITLE<br>1.2 NAME     |               |                    |  |                                |                                    | манус              | Addition                                |
| STREET ADDRESS  | 2478 SHC                         |             |                        |  |               | 1.3 STREET                | ADDRESS       |                    |  |                                |                                    |                    |   |
| GITY - \$1 - ZiF  | OVIEDO F                         |             |                        |  |               | 1.4 CITY-S                |               |                    |  |                                |                                    |                    |   |
| TIBLE   |                                  |             |                        | ☐ D£   | LETE          | 2.1 TITLE                 | <u></u>       | <u> </u>           | ***************************************  |                                |                                    | Chan <b>g</b> e    | Addition                                |
| NAME  |                                  |             |                        |  |               | 2.2 NAME                  |               |                    |  |                                |                                    |                    |   |
| STREET ADDRESS  |                                  |             |                        |  |               | 2.3 STREET                | ADDRESS       |                    |  |                                |                                    |                    |   |
| CHTY - ST - ZIP   |                                  |             |                        | 77.  | ) CYC         | 2.4 CITY-5                | ST-ZIP        |                    |  |                                |                                    | haces              | 4 a a a a a a a a a a a a a a a a a a a |
| TILE  |                                  |             |                        |  | LEIE          | 3.1 TITLE<br>3.2 NAME     |               |                    |  |                                | L                                  | Change             | Addition                                |
| NAM:<br>STREEL ADDRESS  |                                  |             |                        |  |               | 3.3 STREET                | ADDRESS       |                    |  |                                |                                    |                    |   |
| CHTY - ST - 7IP   |                                  |             |                        |  |               | 3.4. CITY-5               |               |                    |  |                                |                                    |                    |   |
| TILE  |                                  |             |                        | ☐ DE   | LETE          | 4.1 TITLE                 |               |                    | · · · · · · · · · · · · · · · · · · ·  |                                |                                    | Change             | Addition                                |
| NAM:  |                                  |             |                        | •  | ;             | 4. 2 NAME                 |               |                    |  |                                |                                    |                    |   |
| STREET ADDRESS  |                                  |             |                        |  |               | 4.3 STREET                |               |                    |  |                                |                                    |                    |   |
| CHY-S1-7IP  |                                  |             |                        | □ DE   | I FTF         | 4.4 CITY - S<br>5.1 TITLE | IT-ZIP        | <del> </del>       |  |                                | <b>,</b> ,                         | Change             | Addition                                |
| TH LE<br>NAME   |                                  |             |                        | <b></b> 111  |               | 5.1 NAME                  |               |                    |  |                                | ا <b>لـــا</b>                     | er en igv          | FIGUREDIA .                             |
| STREET ADDRESS  |                                  |             |                        |  |               | 5.3 STREET                | ADDRESS       |                    |  |                                |                                    |                    |   |
| CHT+ST-ZIP  |                                  |             |                        |  |               | 5.4 CITY - S              |               |                    |  |                                |                                    |                    |   |
| 11°LF   |                                  |             |                        | DE   | LETE          | 6.1 TITLE                 |               |                    | ***************************************  |                                |                                    | Change             | Addition                                |
| NAME  |                                  |             |                        |  |               | 62 NAME                   |               |                    |  |                                |                                    |                    |   |
| STREET ADDRESS  |                                  |             |                        |  |               | 6.3 STREET                |               |                    |  |                                |                                    |                    |   |
| 011Y-\$1-7IP  | by cortify that                  | the intorro | ation sumplied w       | ith this filing does   | not qualify f | 64 City-S                 |               | stated i           | n Section 119.07(3)(i). Florida  | Statutes                       | L further cert                     | ify that t         | he                                      |

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:**