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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1 Committee	MEN # 362177	/				
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Principal Place	of Rusiness	Mailing Address			I DIA BIBIA BIBIA BIBIA DI	
•		4709 N HESPERIDES ST		ĺ		
4709 N HESPER PO BOX 15813	IIDES SI	PO BOX 15813				
TAMPA FL 33684 TAMPA FL 33684			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed		
1.1.20				04/06/1970 4. FEI Number		olied For
	lace of Business	2a. Mailing Address		59-1294982		Applicable
21	# 010	Suite, Apt. #, etc.			\$8.75 A	
Suite, Apt.	#, <del>0</del> 10.	27		5. Certifcate of Status Desired	Fee Red	
City & State	P	City & State		6. Election Campaign Financing	\$5.00	May Be
23	_	28		Trust Fund Contribution	Added to	,
Zip	Country	Zip	Country	8. This corporation owes the current year		
24	25	29	30	Personal Property Tax.	☑ Yes	□No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registe	red Agent	
001	TO DODERT 0		81 Name			
	ITS, ROBERT S		82 Street A	Address (P.O. Box Number is Not Acceptable)		
	PALISADES DRIVE		107	31 Dalton Av.		
IAM	PA FL 33615		83			
			84 City	-	85 Zip C	ode 8615
			//6			
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-#:	-cintared exact or both in the Stat	to of Elorida. Such channe was au	ithorized by the comoi	corporation submits this statement for the purpos ration's board of directors. I hereby accept the a	ppointment as reg	gistered
-#:	to the provisions of Sections 607.09 egistered agent, or both, in the Stat m familiar with, and accept the obliq	to of Elorida. Such channe was au	ithorized by the comoi	corporation submits this statement for the purpose ration's board of directors. I hereby accept the a	ppointment as reg	gistered
office or nagent. I a	egistered agent, or both, in the Stat m familiar with, and accept the obli	te of Florida. Such change was au gations of, Section 607.0505, Flori	ithorized by the corporate statutes.	ration's board of directors, I hereby accept the a	ppointment as reg	gistered
office or n agent. I a SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered as	te of Florida. Such change was au gations of, Section 607.0505, Flori gent and title if applicable. (NOTE:	ithorized by the comoi	ration's board of directors, I hereby accept the a	E E	Jistered
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office or ragent. I a SIGNATURE  12.	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered a OFFICERS A	te of Florida. Such change was au gations of, Section 607.0505, Flori gent and title if applicable. (NOTE: I	ithorized by the corpolida Statutes.  Registered Agent signature recently 13.	quired when reinstating)  ADDITIONS/CHANGES TO OFFICER:	E S AND DIRECTO	RS IN 12
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office or ragent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Staf m familiar with, and accept the oblig Signature, typed or printed name of registered a OFFICERS A PD COATS, ROBERT 8704 PALISADES DRIVE TAMPA, FL 00000 STD	te of Florida. Such change was au gations of, Section 607.0505, Flori gent and title if applicable.  (NOTE: IAND DIRECTORS DELETE	Registered Agent signature received 13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	quired when reinstating)  ADDITIONS/CHANGES TO OFFICER:  10731 Dalton Av. Tampa, FL 33615	E S AND DIRECTO	RS IN 12
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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 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, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

813-876-9126