FILED Apr 12, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

| DOCUI                               | MENT # 615219                                     | }                                    |              |                        |  |                        |                 |
|-------------------------------------|---|--------------------------------------|--------------|------------------------|--|------------------------|-----------------|
| i. Corporation                      | RYDZINSKI - ASSOCIATE                             |                                      |              |                        |  |                        |                 |
|                                     |   |                                      |              |                        |  |                        |                 |
| Principal Place                     | of Business                                       | Mailing Address                      |              |                        |  | il Dibil Bion Cibil 81 | DEL DIGITE LOBI |
| 3569 WEBBER ST 3569 WEBBER ST       |   |                                      |              |                        |  |                        |                 |
| SARASOTA FL 34239 SARASOTA FL 34239 |   |                                      |              |                        | DO NOT WRITE IN THIS SPACE   |                        |                 |
|                                     |   |                                      |              |                        | 3. Date Incorporated or Qualified  | 13 3FACE               | <del></del>     |
|                                     |   |                                      |              | •                      | 03/26/1979   |                        | -               |
| 2 Principal D                       | lace of Business                                  | 2a. Mailing Address                  |              |                        | 4. FEI Number  | Apr                    | lied For        |
| 2. Fillicipal Fi                    | race or business                                  | 26                                   |              |                        | 59-1895905   | Not                    | Applicable      |
| Suite, Apt.                         | #. etc.   | Suite, Apt. #, etc.                  |              |                        |  | \$8.75 A               | dditional       |
| 22                                  |   | 27                                   | ~            |                        | 5. Certificate of Status Desired   | Fee Rec                | uired           |
| City & State                        | e   | City & State                         |              |                        | 6. Election Campaign Financing   | \$5.00                 | May Be          |
| 23                                  |   | 28                                   |              |                        | Trust Fund Contribution  | Added to               | Fees            |
| Zip                                 | Country   | Zip                                  | Cour         | itry                   | 8. This corporation owes the current year  |                        |                 |
| 24                                  | 25  |                                      | 30           |                        | Personal Property Tax.   |                        | □No             |
|                                     | 9. Name and Address of Curre                      | ent Registered Agent                 |              | 81 Name                | 10. Name and Address of New Registere  | a Agent                |                 |
| DVD.                                | ZINSKI, PAUL B                                    |                                      |              | o i Name               |  |                        |                 |
| 3569 WEBBER ST                      |   |                                      | Ì            | 82 Street Add          | dress (P.O. Box Number is Not Acceptable)  |                        |                 |
| SARASOTA FL 33579                   |   |                                      |              | 83                     |  |                        |                 |
| 0,44                                | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,           |                                      | - 1          | 93                     |  |                        |                 |
|                                     |   |                                      |              | 84 City                |  | 85 Zip C               | ode             |
| 44 Durauant                         | to the provinces of Sections 607.05               | 02 and 607 1508 Florida Statute      | e the ah     | ove-named con          | poration submits this statement for the purpose  | of changing its r      | registered      |
| office or r                         | onictored agent or both in the Stat               | e of Florida. Such change was au     | thorized     | by the corporat        | ion's board of directors. I hereby accept the ap   | pointment as reg       | istered         |
|                                     | m familiar with, and accept the oblig             | jations of, Section 607.0505, Fion   | iva Statu    | les.                   |  |                        | Ì               |
| SIGNATURE                           | Signature, typed or printed name of registered as | gent and title if applicable. (NOTE: | Registered / | Agent signature requir | red when reinstating) DATE   |                        |                 |
| 12.                                 |   | ND DIRECTORS                         | 13.          |                        | ADDITIONS/CHANGES TO OFFICERS  |                        |                 |
| TITLE                               | PD  | ☐ DELETE                             | 1.1 777      | LE                     |  | Change                 | ☐ Addition      |
| NAME                                | rydzinski, paul B                                 |                                      | 1.2 NA       | ME                     |  |                        |                 |
| STREET ADDRESS                      | 3407 PEMBROOK                                     |                                      | 1.3 STF      | REET ADDRESS           |  |                        |                 |
| C/TY+ST-Z/P                         | SARASOTA FL                                       |                                      | 1.4 CIT      | Y-ST-ZIP               |  |                        |                 |
| TITLE                               |   | ☐ DELETE                             | 2.1 TIT      | LE                     |  | Change                 | ☐ Addition      |
| NAME                                |   |                                      | 2.2 NA       | ME                     |  |                        | į               |
| STREET ADDRESS                      |   |                                      | 2.3 STF      | REET ADDRESS           |  |                        | ļ               |
| CITY-ST-ZIP.                        |   |                                      | _            | ry-st-zip              |  | Change                 | ☐ Addition      |
| TITLE                               |   | ☐ DELETE                             | 3.1 TIT      |                        |  | Change                 | L] Addition     |
| NAME                                |   |                                      | 3.2 NA       |                        |  |                        | -               |
| STREET ADDRESS                      |   |                                      | 1            | REET ADDRESS           |  |                        | ĺ               |
| CITY-ST-ZIP                         |   | ☐ DELETE                             | _            | ry-ST-ZIP              |  | Change                 | Addition        |
| TITLE                               |   | □ DECE IE                            | 4,1 TIT      |                        |  |                        | ا (۱۹۵۰۰۰۰۰)    |
| NAME                                |   |                                      | 4. 2 NA      |                        |  |                        |                 |
| STREET ADDRESS                      |   |                                      |              | REET ADDRESS           |  |                        |                 |
| CITY-ST-ZIP<br>TITLE                |   | ☐ DELETE                             | 4.4 CIT      | Y-ST-ZIP               | and the second of the second o | ☐ Change               | Addition        |
| NAME                                |   |                                      | 5.2 NA       |                        |  | _ +                    | _               |
| STREET ADDRESS                      |   |                                      |              | REETADORESS            |  |                        | ļ               |
| CITY-ST-ZIP                         |   |                                      |              | Y-ST-ZIP               |  |                        | 1               |
| TITLE                               |   | ☐ DELETE                             | 6.1 TIT      | LE                     | <del></del>  | ☐ Change               | Addition        |
| NAME                                | (   |                                      | 6.2 NA       | ME                     |  |                        | Į               |

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 corporation or the execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

6.4 C/TY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS