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

DOCUMENT # F39310

1. Corporation Name

PILOIAN INVESTMENTS, INC.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90060 011 ***150.00



Principal Place of Business Mailing Address 585 WEST CHURCH AVENUE LONGWOOD FL 32750 DO NOT WRITE IN THIS	SBIS BIBIS BIBIS BIBIS BIBIS SEBI
LONGWOOD FL 32750 LONGWOOD FL 32750	
LONGWOOD FL 32750 LONGWOOD FL 32750	
	SPACE
3. Date Incorporated or Qualifed	- TOTAGE
06/03/1981	
	Applied For
Z. Fillipar risce of business	Not Applicable
21 59-2097567	\$8.75 Additional
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired	Fee Required
22 27 6 Flection Campaign Financing	
	\$5.00 May Be Added to Fees
20	
	angibie Zves □No
24 25 29 30 Personal Property Tax. 9 Name and Address of Current Registered Agent 10. Name and Address of New Registered	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered 81 Name	Agent
PILOIAN, BILLY S	
585 WEST CHURCH AVE. 82 Street Address (P.O. Box Number is Not Acceptable)	
LONGWOOD FL 32750 83	
83 83	
84 City	85 Zip Code
The state of the s	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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	intment as registered
agent. [am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND	ND DIRECTORS IN 12
TITLE SD DELETE 11TITLE	Change Addition
NAME PILOIAN, GLADYS G 1.2 NAME	
FOR IMPORT OFFICE AND	Ì
LONOWOOD FI	
CITY-ST-ZIP LUNGWUUD FL 1.4CITY-ST-ZIP	
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TILE PD DELETE 21TITLE	Change Addition
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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 pr on an attachment with an address, with all other like empowered.