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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L23483

STEVE'S SERVICES, INC.

FILED Jan 29, 1999 8:00am **Secretary of State**

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| 1989 TRADE C | ENTER WAY | 1989 | TRADE CENTER WA | Υ | | | | | | |
| 5550 SHIRLEY STREET | | | 5550 SHIRLEY STREET | | | | DO NOT WRITE IN THIS SPACE | | | |
| NAPLES FL 339 | 942 | | S FL 33942 | | | | | | 15 SPACE | . |
| US | | US | | | | | 3. Date incorporated or C | uairreo | | |
| | | 1 | | | | | 10/17/1989 4. FEI Number | | | |
| 2. Principal P | lace of Business | | lailing Address | | | | 1 | | — — · | oplied For |
| 21 | | 26 | | | | | 65-0159095 | · | | ot Applicable |
| Suite, Apt. | #, etc. | | uite, Apt. #, etc. | | | | 5. Certificate of Status De | sired 🔲 , | | Additional equired |
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| City & Stat | ie . | | ity & State | | | | 6. Election Campaign Fin | - 11 | | May Be it |
| 23 | D | 28 | 12. | | | | Trust Fund Contribution | | | to rees |
| Zip | Country | Zi | | | untry | | 8. This corporation owes | • | ntangible Yes | □No |
| 24 | 25 | 29 | | 30 | 1 | | Personal Property Tax 10. Name and Address o | | | |
| | 9. Name and Address of Current | t Register | ed Agent | | 81 | Name | 10. Maine and Address o | New Registere | u Agent , | |
| CAL | YORE, MICHAEL | | | | " | Hamo | | | | • |
| 5161090 | TRADE CENTER WAY | | | | 82 | Street Addr | ress (P.O. Box Number is Not | Acceptable) | - | , •• |
| | LES FL 33942 | | | | | | 2 15 3 1 4 5 4 5 4 5 5 5 5 5 6 5 6 6 5 6 6 6 6 6 | r gegunt geneem kan ki ge r Roma in kinga kan di di ki | Charle State Visit | 31511 51511 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
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| 4300 BOART O | to the provisions of Sections 607.0502 | | <u> </u> | | | | | <u> </u> | L | |
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| Signature | registered agent, or both, in the State of the familiar with, and accept the obligate agent when the state of | of Florida. tions of, Se t and title if ap | Such change was action 607.0505, Fluplicable. (NOT | authorize orida Sta E: Registere | d by ti tutes. | he corporation | on's board of directors. I heret d when reinstating) | DATE | | |
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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.

SIGNATURE: