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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L27367

1. Corporation Name

PROGRESS ENTERPRISES INC

Inoan	EGO EIVIEIN INGEG, NVC.										
Principal Plac	ce of Business	Mailing	Address]	i a taii bibii i		
9731 BEACH B	RI VD	-	X 17547								
JACKSONVILLE			ONVILLE FL 32245	5-7547							
								DO NOT WRITE IN TH	IS SPACE		
İ							;	3. Date Incorporated or Qualifed			
2 2 :								11/01/1989		·	
—	Place of Business	-	iling Address				'	4. FEI Number	ļ	Applied F	
Suite, Apt.	# 212	26						<u> 59-2976228</u>	<u> </u>	Not Appli	
22 Suite, Apr.	. #, etc.	\vdash	ite, Apt. #, etc.					5. Certificate of Status Desired		75 Addition e Required	
City & Stat	te	27 Cits	v & Staté				بـــا	Floring Companies Financia		•	
23		28	, a olaa				_ '	6. Election Campaign Financing Trust Fund Contribution		00 May B	
Zip	Country	Zip		Cou	intry		٠,			red to ree:	
24	25	29		30	,		'	This corporation owes the current year I Personal Property Tax.	ntangible ☐ Yes	□No	
	9. Name and Address of Curr		d Agent	1001			10	0. Name and Address of New Registere			
		-	<u> </u>	· · · · · · · · · · · · · · · · · · ·	81	Name					
	HERLAND, PAUL L					24					
9731	1 BEACH BLVD.				82	Street Add	dress ((P.O. Box Number is Not Acceptable)			
JACI	KSONVILLE FL 32246				83						
}					Щ						
					84	City		F	85	Zip Code	
j					1 1				_ 1 1		
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.19	508, Florida Statu	utes, the a	bove	-named cor	rporati	on submits this statement for the purpose of	of changing	g its register	ered
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obli	ite of Florida. S	uch change was	authorized	l by t	-named cor he corporat	rporati tion's l	on submits this statement for the purpose of board of directors. I hereby accept the app	of changing pintment a	g its registe s registere	ered d
office or r	registered agent, or both, in the Sta im familiar with, and accept the obli	ite of Florida. S igations of, Sec	uch change was tion 607.0505, Fl	authorized Iorida Stati	d by t utes.	the corporat	tion's l	board of directors. I hereby accept the app	of changing ointment a	g its registe s registere	ered d
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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 en an attachment with an address, with all other like empowered.

SIGNATURE: