## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE ...

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P93000085231

## PRINTING PROFESSIONALS & PUBLISHERS, INC.

Mailing Address Principal Place of Business

**FILED** Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90033 037 \*\*\*550.00

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803 - 17TH AVE. W 803 - 17TH AVE. W. BRADENTON FL 34205 US US					DO NOT WRITE I	N THIS SPACE		
					12/14/1993			
2. Principal Pl	ace of Business	2a. Mailing Address	<u> </u>		4. FEI Number	_	Applied For	
21		26			65-0474666		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired			
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current	year	[].	
24	25	29	30		Intangible Personal Property.	Yes	Ľ No	
	9, Name and Address of Curr	rent Registered Agent	··	81 Name	10. Name and Address of New Regi	stered Agent		
HRY	CYK, ROBERT			o i Name				
	17TH AVENUE WEST		82 Street Add		dress (P.O. Box Number is Not Acceptable)			
	DENTON FL 34205		83					
				84 City	<del></del>	85	Zip Code	
			··-			FL		
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of 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 appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.								
SIGNATURE .		AND THE RESERVE OF THE PARTY OF	TE Posinto	red Agent signature requ	urred when reinstation	DATE	<u> </u>	
0.3.00.00			13.	red Agent alginature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	DELETE	1.1 TI	TLE .		Chan		
NAME	HRYCYK, ROBERT	7_10ccc1c	1.2 NA	ME				
STREET ADDRESS	803 17TH AVE W.			REET ADDRESS			ٳ	
CITY-ST-ZIP	BRADENTON FL	1.4 C		TY-ST-ZIP			{	
TITLE	D	DELETE	2.1 TI	TLE		Chan	nge Addition	
NAME	HRYCYK, BETTY		2.2 NA	ME				
STREET ADDRESS 803 17TH AVE W.			2.3 STREET ADDRESS					
CITY-ST-ZIP	BRADENTON FL		2.4 CI	TY-ST-ZIP				
TITLE		DELETE	3.1 TI	rle		L Char	nge Addition	
NAME			3.2 NA	WE			1	
STREET ADDRESS			3.3 ST	REET ADDRESS				
CITY-ST-ZIP	·	<del></del>	3.4 CI	TY-ST-ZIP				
TITLE		DELETE	4.1 TI	rle		L Char	nge Addition	
NAME			4.2 N/	ME				
STREET ADDRESS			4.3 ST	REET ADDRESS				
CITY-ST-ZIP			_	TY-ST-ZIP				
TITLE		DELETE	5.1 Tr	1		Char	nge Addition	
NAME			5.2 NA	1				
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP			_	TY-ST-ZIP		<u> </u>		
TITLE		DELETE	6.1 TI			∐ Char	nge L Addition	
NAME			6.2 N/					
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP	artifu that the information cumplied	with this filing does not qualify for th	ne exemi	TY-ST-ZIP	stion 119.07(3)(i). Florida Statutes. I further	r certify that the i	nformation	
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 corperation 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.								

**SIGNATURE:** 



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Please note we did NOT please a 'first' notice for please a 'first' notice of