## 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

## **FILED** Feb 20, 1999 8:00 am Secretary of State 02-20-1999 90051 034 \*\*\*150.00

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FOXCROFT TRADING, INC.

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Principal Place	e of Business	М	lailing Address						2711	
14300 HUNTING ORLANDO FL 3			3000 Hunting Field Ct Rlando FL 32824		_					
US		-						DO NOT WRITE IN THIS SI	ACE	
								3. Date Incorporated or Qualifed 09/26/1994	·	
2. Principal P	lace of Business	2a	. Mailing Address					4. FEI Number	Ar	oplied For
21		26						<u>59-5264259</u>		ot Applicable
Suite, Apt.	#, etc.	$^{-}$ L	Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional
22		27							<del></del>	equired
City & Stat	e		City & State					6. Election Campaign Financing		May Be
23		28						Trust Fund Contribution		to Fees
Zip 24	Country 25	29	Zip	30 Cot	untry			8. This corporation owes the current year Intangent Personal Property Tax.	gible ]Yes	□No
	9. Name and Address of Curre	nt Regis	stered Agent					10. Name and Address of New Registered Ag	ent	
041	7 DDIAN				81	Nan	ne			\
SANZ, BRIAN 14300 HUNTINGFIELD COURT			82	Stre	et Addre	ess (P.O. Box Number is Not Acceptable)				
ORL	ANDO FL 32824				83					
Į									DE   75-	Code
					84	City		FLI		
i	to the provisions of aections 607.05 egistered agent, of both, in the State m familiar with, and accept the obligi	and 6 of Florid Mons of	507.1508, Florida Statute da. Such change was au f, Section 607.0505, Flor	s, the a uthorized ida Stat	bove d by utes	the co	ed.corpo orporation	oration submits this statement for the purpose of ch n's board of directors. I hereby accept the appointn	anging its nent as re	registered igistered
SIGNATURE	Signature, typed or printed harpe of registered age	ent and title	if applicable (NOTE:	Registered	1 Agen	ıt signatı	ure required	when reinstating) DATE		
12.	OFFICERS A	VD DIRE	ECTORS	13.				ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	
TITLE	D		☐ DÉLETE	1.1 TI	TLE				] Change	☐ Addition
NAME	SANZ, BRIAN			1.2 N	AMÉ		Ų			į
STREET ADDRESS	14300 HUNTINGFIELD COURT	,		1.3 S	TREET	FADDRE	SS			
CITY-ST-ZIP	ORLANDO FL 32824			1.4 C	ITY-\$1	T-ZIP				
TITLE	D		☐ DELETE	2.1 TI	TLE			Ľ	_ Change	Addition
NAME	SANZ, ANA MARIA C			2.2 N	AME					ļ
STREET ADDRESS	14300 HUNTINGFIELD COURT	'		2.3 S	TREET	T ADDRE	:SS			
CITY-ST-ZIP	ORLANDO FL 32824			2.40	ITY-S	T-ZIP				
TITLE			☐ DELETE	3.1 TI	TLE			[	] Change	☐ Addition
NAME				3.2 N						
STREET ADDRESS				3.3 S	TREET	ADDRE	SS			
CITY-ST-ZIP			Cherete	_	TY-S	T-ZIP	-		Change	Addition
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NAME				4 2 N				· <b>m</b> · · · · · ·		
STREET ADDRESS						FADDRE	:SS			į
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NAME	li .					ADDRE	22:			ļ
STREET ADDRESS					ITY-SI					ļ
CITY-ST-ZIP	<u> </u>		☐ DELETE	6.1 TI		1-41	-	Г	] Change	Addition
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STREET ADDRESS					ITY-SI					<i>'</i>
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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 trubble 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 the retainment with an address, with all other like empowered.

SIGNATURE: