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 # P97000037857

1. Corporation Name ALANDSBEEK, INC.

Principal Place of Business

Mailing Address

301 NORTH FERNCREEK AVENUE ORLANDO FL 32803

301 NORTH FERNCREEK AVENUE ORLANDO FL 32803

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90175 037 ***150.00



						DO NOT	WRITE IN THIS	SPACE	
					3	3. Date Incorporated or Qualifed			
						04/25/1997]
2. Principal Place of Business			2a, Mailing Address			4. FEI Number		Ap	plied For
<u> </u>	dot of Bacilloss	26				59-3454852		No	t Applicable
21 _ Suite, Apt. #, etc			Suite, Apt. #, etc.					\$8.75 A	
			27			Certificate of Status Desir	ed_ <u>::::</u>	Fee Re	
22 City & State			City & State			- Ft. di - Companies Finan			
City & State	•	\vdash	nly & State		[6	Election Campaign Finan Contribution	cing	\$5.00 Added t	•
23		28	!	Country		Trust Fund Contribution			0 / 663
Zip	Country	z	•	Country	8	8. This corporation owes the	current year inta	ngibie □Yes	₩No
24	[25]	29	····	0		Personal Property Tax.	lave Barristanad A		AC IAO
	9. Name and Address of Curren	it Register	red Agent	047 1	10	0. Name and Address of N	iew Registered A	gent	
Name (LAPHAM	GEO	RGP	= /.
MCLARRY, GEORGE C					Address ((P.O. Box Number is Not Ac	ceptable)		
301 NORTH FERNCREEK AVENUE				82 Street	3 0		ERNORE	EK A	VENUE
ORLANDO FL 32803				83					
				24 20				os Zin C	
				84 City	ORI	LANDO	FL	85 Zip 9	ゔ゚ゟ゚゚゙゙゙゙゙゚ゕ゙゙゙゙゙ヿ
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 propagation and the state of Florida Statutes.									
agent. I am familier with, and accept the obligations of Section 507 0505. Florida Statutes.									
SIGNATURE		TA	KIR IIW	~		<u>g</u>	DATE	/	
	Signature, typed or printed name of registered ego. OFFICERS AN			tegistered Agent signature re	required wher	ADDITIONS/CHANGES TO	DATE	DIRECTO	RS IN 12
12.		ND DIREC	DELETE		1	ADDITIONS/CHANGES 1	O OI I IOLIIO AII	Change	Addition
TITLE	D DELL'ARD OFFICE AND ADDITION		C OFFERE	1.1 TITLE					
NAME	DEKKER-GIEZENAAR, ARDINA			1.2 NAME					
STREET ADDRESS	GRIENDEN 24, 3831 HR LEUS	DEN		1.3 STREET ADDRESS					
CITY-ST-ZIP	THE NETHERLANDS OC			1.4 CITY-ST-ZIP					
TITLE	D		☐ DELETE	2.1 TITLE				Change	Addition
NAME	DEKKER, MENNO A			2.2 NAME					{
STREET ADDRESS	GRIENDEN 24, 3831 HR LEUS	DEN		2.3 STREET ADDRESS					i
-CITY-ST-ZIP	THE NETHERLANDS OC.			.2.4 City-St-ZIP					
TITLE			☐ DELETE	3.1 TITLE	7			☐ Change	☐ Addition
NAME	;`		-	3.2 NAME					ì
	· ·· ,			3.3 STREET ADDRESS					
STREET ADDRESS	•								
CITY-ST-ZIP			□ DELETE	3.4. CITY-ST-ZIP			-	Change	Addition
·TITLE 1			□ bereie	4.1 TITLE					
NAME				4.2 NAME					
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP				4.4 CITY-ST-ZIP					
TITLE			☐ DELETE	5.1 TITLE				☐ Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET ADDRESS					
CITY-ST-ZIP				5.4 CITY-ST-ZIP					
TITLE			☐ DELETE	6.1 TITLE				Change	Addition
NAME				6.2 NAME					
J				6.3 STREET ADDRESS					
STREET ADDRESS				*** ****** ***************************	1				

CITY-ST-ZIP 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 supplied ental appear of port 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 of th

SIGNATURE: