#### 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



FLORIDA DEPARTMENT OF STATE

### Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 DOCUMENT # P98000042709

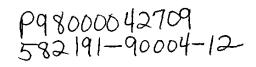
# **FILED** Jul 07, 1999 8:00 am Secretary of State

07-07-1999 90004 012 \*\*\*150.00

REPETTI ENTERPRISES, INC.										
Principal Place of Business Mailing Address 2121 STEEPLECHASE LANE 2121 STEEPLECHASE LANE PALM HARBOR FL 34684 PALM HARBOR FL 34684						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified 05/08/1998		CE		
2. Principal P	lace of Business	2a. Mailing Address				1. FEI Number 125 - 0835183	 >	<del></del>	lied For Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Be				
Zip	Country	Zip	<del></del>			Trust Fund Contribution Added to Fer  8. This corporation owes the current year		Fees		
24	9. Name and Address of Current	29	30			Intangible Personal Property.  10. Name and Address of New Re	Ye Area		No	
,		Registered Agent		81 N	lame	TO. Maine and Address of New Ne	Biotorea Agei	<u>"</u>		
REPETTI, GARY J. 2121 STEEPLECHASE LANE				82 S	Street Addres	ss (P.O. Box Number is Not Acceptab	le)			
PALM HARBOR FL 34684 19 10 10 10 10 10 10 10 10 10 10 10 10 10				83						
			-	B4 C			<b>-</b> 88	Zip Co	ode	
44 =	007.000		- 45 5			tion as business this statement for the pure	FL of	a ite rogi	ctorad	
office or i	to the provisions of sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	of Florida. Such change was a	authorized	by the	corporation	s board of directors. I hereby accept	the appointme	nt as regi	stered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	OTE: Register	ed Agent	signature require	ed when reinstating)	DATE	_	<del></del>	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFI	CERS AND D	RECTOR	RS IN 12	
TITLE	PSTD	DELETE	1.1 TIT	LE				Change [	Addition	
NAME	REPETTI, GARY J		1.2 NA	ME					ĺ	
STREET ADDRESS	_ : = _ =			1.3 STREET ADDRESS					} ;	
CITY-ST-ZIP	PALM HARBOR FL 34684			Y-ST-ZIP						
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NAME			5.2 NA		0000					
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CITY-ST-ZIP		<u> </u>		Y-ST-ZIP	<del></del>				1	
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NAME			6.2 NA							
STREET ADDRESS			6.3 STF	EET ADD	HESS				1	

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.

**SIGNATURE:** 



### GARY J. REPETTI PRIVATE INVESTIGATOR

REPETTI ENTERPRISES INC.

P.O. BOX 6111 PALM HARBOR, FLORIDA 34684 727-771-8424 1-800-274-6156 Fax 727-781-1691

June 30, 1999

Florida Dept. of State Division of Corporations Annual Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Repetti Enterprises Inc.

Dear Sir/Madam;

Today I received a "2nd Notice" 1999 Profit Corp. Annual Report Packet indicating that a late fee of \$400.00 was due.

Please be advised that I never received any prior notification and this is the first notice that was sent to me. I handle all the billing for my office so I am positive of this.

I respectfully request that the \$400.00 late fee be waived.

Sincerely,

Gary J. Repetti