FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT



FLORIDA DEPARTMENT OF STATE

FILED May 13, 1999 8:00 am

CORPORATION ANNUAL REPORT 1999		DIVISI	Secretary of State DIVISION OF CORPORATIO		, ONS	Secretary of State 05-13-1999 90047 046 ***150.00				
DOCUM 1. Corporation New C1		009/22 ders, Inc								
		10 III . Add.								
Principal Place of Business Mailing Address										
	ntral Ave.	1143 Central Ave.			DO NOT WRITE IN THIS SPACE					
Sarasot	a, FL 34236	Saras	Sarasota, FL 34236			3. Date Incorporated or Qualifed				
						10/27/98				
2. Principal Pla	ce of Business	2a. Mailing Add	ess			4. FEI Number			pplied For	_
21	Ce or pasimoso	26	<u> </u>			65-0870818			ot Applicable Additional	-
Suite, Apt. #.	, etc.	Suite, Apt. #	, etc.			5. Certifcate of Status Desired		Fee R	equired	_
City & State		City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees	_
Zip	Country	Zip	_	ountry		8. This corporation owes the curre	nt year Intai	ngible □ Yes	□ , No	-
24	25	29	30			Personal Property Tax. 10. Name and Address of New Re				
	9. Name and Address of Currer	nt Registered Agent		81	Name	To, Name and Alexander	<u> </u>			
	, Brian					dress (P.O. Box Number is Not Acceptal	ole)			\neg
	Central Ave.									\neg
Saraso	ta, FL 34236			83	l			les Zin	Code	
				84	1 '		FL	1 .		_
11. Pursuant to office or re agent. I an	o the provisions of Sections 607.050 gistered agent, or both, in the State n familiar with, and accept the obliga	ations of, Section 607	.0505, Florida S	tatutes	S.	proporation submits this statement for the pation's board of directors. I hereby accept	ourpose of c the appoin	hanging it	ts registered registered	
SIGNATURE	Signature, typed or printed name of registered age	BII 1	an Bish	ered Age	ent signature rec	ident urled when reinstating)	DATE	D DIDECT	ODS IN 12	
12,	OFFICERS AI	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	ICERS AN	Change	Addit	ion
TITLE			•	.1 TITLE	ļ	·				
NAME	PD Bishop, Brian			.2 NAME	- 1					
STREET ADDRESS	1143 Central A	ve.		.3 STREE .4 CITY-	ET ADDRESS					
CITY-ST-ZIP	Sarasota, FL 3	4236 - 		1 TITLE				Chang	e 🗌 Addı	lion
TITLE			•	2 NAME	J	•				- {
NAME]:	2.3 STPE	ET ADDRESS				-	
STREET ADDRESS CITY-ST-ZIP				2. 4 CITY	-ST-ZIP			Chang	e	tion
TITLE			DELETE	3.1 TITLE					_	
NAME				3.2 NAME						
STREET ADDRESS					ET ADDRESS			_		
CITY-ST-ZIP				3.4. CITY 4.1 TITLE				Chang	ge 🗌 Add	ition
TITLE			1	4. 2 NAM	ļ					
NAME					ET ADDRESS					- 1
STREET ADDRESS				4 4 CITY	-ST-ZIP			Chan	ge 🔲 Add	iition
CITY-ST-ZIP TITLE			DELETE	5.1 TITLE	í				a- 1,400	
NAME				5.2 NAM						
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP			DELETE	5.4 CITY 6.1 TITLE	-ST-ZIP			Chan	ge Add	lition
ITLE	Ì	L	J VELETE	62 NAM						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 conforation or the teceiver 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, with all other like empowered. CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Brian Bishop, President 4/ /99 941-951-6104

CHARLE AND TYPED'OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR