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Feb 25, 1999 8:00 am  
Secretary of State

02-25-1999 90036 041 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V67532

1. Corporation Name

SIX FORTY FOUR CORPORATION

Principal Place of Business

644 3RD AVE S  
ST PETERSBURG FL 33701

Mailing Address

PO BOX 16766  
ST PETERSBURG FL 33733  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/25/1992

4. FEI Number

59-3162793

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

TESSIER, ANNETTA I.  
644 THIRD AVE SOUTH  
ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name TESSIER, Joseph A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
644 THIRD AVE S.  
83 St. Petersburg, FL 33701  
84 City FL 85 Zip Code

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 Joseph H. Tessier, V.PRES.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered agent signature required when reinstating)

1-6-99.

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD  
NAME ANNETTA L. TESSIER  
STREET ADDRESS 4351 106TH DRIVE NORTH  
CITY-ST-ZIP CLEARWATER FL

TITLE PTD  
NAME JOSEPH H. TESSIER  
STREET ADDRESS 4351 106TH DRIVE NORTH  
CITY-ST-ZIP CLEARWATER FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE V.PRES. TREAS. DIR.  
2.2 NAME Joseph TESSIER.  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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, with all other like empowered.

SIGNATURE:

Joseph H. Tessier, V.PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-6-99.

CR2E034 (11/98)