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 # P97000097881 1. Corporation Name

INFINITE SERVICES BY JARRET LASKER AND PATRICK K

RIEBEL, INC.

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90021 008 ***150.00



Principal Place	of Business	Mailing Address		I (83)(89) ile telli legil egili esili esili esil	12 15()) 1200) 15(2) 15(0) 1(0)	
ST PETERSBURG FL 33705 ST PETERSBU		4127 WHITING DRIVE S.E. ST PETERSBURG FL 33705 US		DO NOT WRITE IN THIS SPACE		
03	•	00		3. Date Incorporated or Qualifed		
				11/14/1997		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	•	26 P.O. Box 15	504	59-3511221	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 51. Vetersbur	y Fi	5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State	7 12.	6. Election Campaign Financing	\$5.00 May Be	
23		28 33731 0	1.5.A	Trust Fund Contribution	Added to Fees	
Zip	Country	— — — —	Country	8. This corporation owes the current year		
24	25	29 30		Personal Property Tax.		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registere	a Agent	
אטור	DEL DATRICK		81 Name			
KRIEBEL, PATRICK 4127 WHITING DRIVE S.E.			82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
ST P	ETERSBURG FL 33705		83			
			84 City		85 Zip Code	
				F		
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 colligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, wheel or printed name of registered agen		tered Agent signature requ		-0 14	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	P		.1 TITLE		☐ Change ☐ Addition	
NAME	LASKER, JARRET	1	.2 NAME			
STREET ADDRESS	4127 WHITING DRIVE S.E.	1	I.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33705		.4 CITY-ST-ZIP			
TITLE	P		2.1 TITLE		Change Addition	
NAME	KRIEBEL, PATRICK	2	2.2 NAME		ļ	
STREET ADDRESS	4127 WHITING DRIVE S.E.	2	2.3 STREET ADDRESS		ľ	
	ST. PETERSBURG FL 33705		2.4 CITY-ST-ZiP		}	
CITY-ST-ZIP TITLE	OT. I ETERIODORO I E 00/00		i.1 πLE		☐ Change ☐ Addition	
NAME		3	3.2 NAME		{	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZiP			3.4. CITY+ST+ZIP			
TITLE			I.1 TITLE	<u> </u>	☐ Change ☐ Addition	
NAME			I. 2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS		}	
1			1.4 CITY-ST-ZIP			
CITY-ST-ZIP			5.1 TITLE	·	☐ Change ☐ Addition	
NAME			5.2 NAME		į	
STREET ADORESS			5.3 STREET ADDRESS			
			5.4 CITY+ST+ZIP			
CITY-ST-ZIP TITLE			3.1 TITLE		☐ Change ☐ Addition	
ļ			5.2 NAME			
NAME CTOECT ADDRESS			3.3 STREET ADDRESS		ļ	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 suppliemental 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 charged, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: