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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # G78572 1. Corporation Name

FILED Apr 05, 1999 8:00 am Secretary of State 04-05-1999 90001 035 ***150.00

BATES S	SERVICES INCORPORATE	D			
Principal Plac	e of Business	Mailing Address	-		F INDESCEN BUSIC FROM I COLON MINE NODE O 1140 MENT MENT MENT MINES DIGIT MENT 1881 I 1881
103 4TH STREET JUPITER FL 33458 103 4TH STREET JUPITER FL 33458				·	DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
(01/12/1984
Principal Place of Business 2a. Mailing Address				-	4. FEI Number Applied For
21 26					59-2357156 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State City & State					6. Election Campaign Financing \$5.00 May Be
23 28					Trust Fund Contribution Added to Fees
Zip Country Zip			Count	ry	8. This corporation owes the current year Intangible
24	25	29 3	10		Personal Property Tax. Yes No
	9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registered Agent
			8	1 Name	
	ES, ROBERT E.		8	2 Street Add	dress (P.O. Box Number is Not Acceptable)
	4TH ST.		L.		
JUP	ITER FL 33458		8	3	
	•		ē	4 City	85 Zip Code
				'	rporation submits this statement for the purpose of changing its registered
agent. I a	Signature, typed or printed name of registered	gations of, Section 607.0505, Floric spent and title if applicable. (NOTE: R AND DIRECTORS			red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPS	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BATES, MELANIE A		1.2 NAM	E	
STREET ADDRESS	100 471 070557		1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33458		1,4 CITY	-ST-ZIP	
TITLE	PT	☐ DELETE	2.1 TITLE	•	☐ Change ☐ Addition
NAME	BATES, ROBERT E		2.2 NAM	E	
STREET ADDRESS	444 471 477		2.3 STR	ET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33458	· · · · · · · · · · · · · · · · · · ·	2. 4 CITY	-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAM	É	
STREET ADDRESS	5		3.3 STR	EET ADDRESS	
CITY-ST-ZiP	<u></u>			'-ST-ZIP	
TITLE		☐ DELETE	4,1 TITL		☐ Change ☐ Addition
NAME			4. 2 NAN	Æ	
STREET ADDRESS	\$		4.3 STRI	EET ADDRESS	
CITY-ST-ZIP				-ST-ZiP	
TITLE		☐ DELETÉ	5.1 TITLE	ļ,	☐ Change ☐ Addition
·NAME			5.2 NAM	i	
STREET ADDRESS	S			ET ADDRESS	
CITY-ST-ZIP		D DELETE	5.4 CITY 6.1 TITLE		☐ Change ☐ Addition
TITLE		☐ DELETE			C Change Addition
NAME			6.2 NAM		
STREET ADDRESS				EET ADDRESS	
1 0004 00 000	i .		■ a.4 CifY	-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 one an attachment with an address, with all other like empowered.

SIGNATURE:

URobert E. Bates