Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90138 012 ***150.00

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 # P94000042045

1. Corporation Name

GREEN'S HOLDINGS, INC.

GI122,1									
Principal Place	e of Business	Mailing Address				I 18871881 III JUGII DIBIL BUIL BUIL BUIL		1881 3131 1881	
211 18TH AVENUE 211 18TH AVE #8 INDIAN ROCKS BEACH FL 33 US				85		DO NOT WRITE IN THIS SPACE			
*						3. Date Incorporated or Qualified 06/06/1994			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Apr	lied For	
21 26						59-3259720	Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 A		
22		City & State			· ·				
City & Stat	e	⊢ ′				6. Election Campaign Financing Trust Fund Contribution	\$5.00 A Added to		
23 ~ Zip	Country	28	Coun	trv		8. This corporation owes the current year Inta		/	
24	25	29 30	¬ ·	,			∐ Yes J	ZNo	
24	9. Name and Address of Currer		<u>'</u>			10. Name and Address of New Registered A	gent		
		<u> </u>	- 1	81	Name				
GREEN, JOHN						(D.O. D., M., has in Not Assessable)			
211 18TH AVE. #8				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
INDIAN ROCKS BEACH FL 34635				83					
-			L	_			T-21		
	•			84	City	FL	85 Zip C	ode	
l office.orm	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autr tions of, Section 607.0505, Florid	nonzed la Statul	tes.	ine corporat	reporation submits this statement for the purpose of cition's board of directors. I hereby accept the appoint	hanging its r Iment as reg	egistered istered	
	Signature, typed or printed name of registered age			agent	t signature requi	ADDITIONS/CHANGES TO OFFICERS ANI	DIRECTO	DC IN 12	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition	
TITLE	· —			1.1 TITLE		•	(J.) 090		
NAME	GREEN, JOHN								
STREET ADDRESS	, .				ADDRESS				
CITY-ST-ZIP	INDIAN ROCKS BEACH FL			1.4 CITY-ST-ZIP 2.1 TITLE			Change	Addition	
TITLE	S	22				•			
NAME	GREEN, DEANNE				ADDDEGO				
STREET ADDRESS	211 18TH AVENUE			2.3 STREET ADDRESS				Í	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL			2. 4 CITY-ST-ZIP			Change	Addition	
_TITLE		المحالف المجاد المحاد المحاد	3.2 NAM		^	man profession of the state of			
NAME .			-		ADDRESS				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3.4. CIT 4,1 TITL		1-ZIP	<u> </u>	□ Change	☐ Addition	
TITLE	·	C) DELETE	1						
NAME		•	4.2 NA		*DDDECC				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	1		4.4 CIT	ĭ•\$[*ZIP	·			

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 comporation 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 chapter 607 or an attachment with an address, with all other like empowered.

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

OELETE

DELETE

Change

Change

Addition

Addition