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 # P93000076854

1. Corporation Name ADEEVA, INC.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90044 036 ***150.00



7.50									
Principal Place of Business Mailing Address							j lestins: iin inibt liin saiti satii naiti saiti	10010 81101 18181	11111 6101 1001
2800 W. 30TH CT. PANAMA CITY FL 32405 2800 W. 30TH CT. PANAMA CITY FL 32405							DO NOT WRITE IN THIS	SPACE	
	. •					3.	Date Incorporated or Qualifed 11/05/1993		
Principal Place of Business 2a. Mailing Address						4.	FEI Number	App	olied For
21 26							<u>59-3212416</u>		Applicable
Suite, Apt.	#, etc.	Suite, 2	Suite, Apt. #, etc.			5.	Certificate of Status Desired	\$8.75 A Fee Red	
City & State	3	City &	State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	
23 Zip	Country Zip			Country	itry 8. This corporation owes the current ve		This corporation owes the current year In	ear Intangible	
24	25 29 30			·		"	Personal Property Tax.		X INo
	9. Name and Address of Cu			T		10.	Name and Address of New Registered	Agent	
			<u>,-:</u>	81	Name		.		
ANDERSON, GARY					82 Street Address (P.O. Box Number is Not Acceptable)				
2800 W. 30TH CT.				62	Street Add	iress (P	O, Box Number is Not Acceptable)		
PANAMA CITY FL 32405				83		_			
	•							- - 2:- C	
				84	City		Fl	_	
office or re	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the ob	ate of Florida. Such	change was author	rized by	the corporat	poratior ion's bo	n submits this statement for the purpose o pard of directors. I hereby accept the appo	f changing its intment as reg	registered jistered
SIGNATURE							rainstaling) DATE		}
					it signature requir		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
12.		AND DIRECTORS		13.			ABBITORO/OFFARGES TO OFFICEROX	Change	Addition
TITLE	, <i>D</i> —		1.2 NAME)				_)	
NAME	ANDERSON, GARY				TADDRESS				
STREET ADDRESS	2800 W. 30TH CT.								
CITY-ST-ZIP	PANAMA CITY FL 32405	 -		1.4 CITY-S 2.1 TITLE	T-ZIP	_		☐ Change	Addition
TITLE	D ANDERSON BOSEMARIE		_	2.2 NAME					
NAME	ANDERSON, ROSEMARIE		i i						Í
STREET ADDRESS	-2800-W. 30TH CT.		1		TADDRESS				
Crry-ST-ZIP	PANAMA CITY FL 32405			2.4 CITY-5	iT-ZIP			Change	Addition
TITLE)				3.1 TMLE					
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	TADDRESS				

6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZiP

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

DELETE

DELETE

DELETE

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:

Change

Change

Change

☐ Addition

Addition

Addition