Applied For

EU34 (11/98)

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

	OCUI	MENT	#	3259	41
4					, , ,

Corporation Name

EDGAR E. PAUL, INC.

2. Principal Place of Business

** **********************************		
Principal Place of Business	Mailing Address	
2703 REDMAN PARKWAY PLANT CITY FL 33566	2703 REDMAN PARKWAY PLANT CITY FL 33566	

2a. Mailing Address

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90232 015 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/01/1968 4. FEI Number

21	400 G/ 200///CCC	26			59-12026 <u>99</u>	No	t Applicable	
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Re		
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added t	o Fees	
Zip	Country 25	Zip 30	Country		This corporation owes the current yea Personal Property Tax.	r Intangible □ Yes	□No _	
<u>*</u>	9. Name and Address of Current		<u> </u>		10. Name and Address of New Registe	red Agent		
			81	Name				
	MIL, NAN		82	82 Street Address (P.O. Box Number is Not Acceptable)				
306 W. REYNOLDS ST				Street Address (F.O. Dox Humber to Not Acceptable)				
Plan	IT CITY FL 33566		83					
	•		84	City		85 Zip (Code	
	,			City	i	FL '		
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of in familiar with, and accept the obligation	Florida, Such change was auth	orizea by i	the corporatio	oration submits this statement for the purpos on's board of directors. I hereby accept the a	e of changing its opointment as re	registered gistered	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NOTE: Re	aistered Agen	t signature required	d when reinstating) DATI	<u> </u>]	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE	Р .	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME	PAUL, DAVID ALLEN		1.2 NAME					
STREET ADDRESS	2703 JAMES L. REDMAN PKWY		1.3 STREET	ADDRESS			ļ	
CITY-ST-ZIP	PLANT CITY FL		1.4 CITY-ST	· ZiP				
TITLE	V	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition	
NAME	PAUL, ERNEST E. JR.		2.2 NAME				Ì	
STREET ADDRESS	2703 REDMAN PARKWAY		2.3 STREET	ADDRESS				
CITY-ST-ZIP	PLANT CITY FL		2. 4 CITY-S	T-ZIP				
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition	
NAME			3.2 NAME				}	
STREET ADDRESS			3.3 STREET	ADDRESS			j	
CITY-ST-ZIP			3.4, CITY-S	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST	r-ZIP		_		
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NAME			•		
STREET ADDRESS			5.3 STREET	ADDRESS			ľ	
CITY-ST-ZIP			5.4 CITY-ST	r-ZIP				
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME	·		6.2 NAME			•		
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP .			6.4 CITY-S1	r-21P	_			
44	ale, that the information according with	this filing does not avalify for th	a evemnti	on stated in S	Section 119.07(3)(i). Florida Statutes, I furthe	certify that the i	nformation	

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.

NATURE: Ernest E. Paul Jr. EQUIRE

4-26-99 813-752-7582