SSA FL 33556 ODESSA FL 33556 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualifed Principal Place of Business 2a. Mailing Address 26 3. Date Incorporated or Qualifed Suite, Apt. #, etc. 5. Certificate of Status Desired R.7.5 Additional 27 Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.7.5 Additional 27 City & State 6. Election Campaign Financing Added to Fees 27 Zip Country 8. This corporation owes the current year Intangible 28 29 30 Personal Property Tax. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 SUITE A ODESSA FL 33556-6775 84 City FL 85 Zip Code 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 agent. I an familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 83 Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a	COR ANNU	NOW: FILING PROFIT RPORATION JAL REPORT 1999		FLORIDA DEPART Kathering Secretary DIVISION OF CO	MENT OF STATE Harris of State	FILI Mar 09, 19 Secretary 03-09-1999 90057	99 8:00 am of State
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