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 # 1. Corporation Name
INDIAN CREEK IN DUSTRIES
INDIAN CREEK IN DUSTRIES
Of BERT ROTHERS
4 103 Holly Drive
1 AKARAC

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90118 038 ***150.00

Principal Plac	ce of Business	Mailing Address	3118	′	
		<u>-</u>	₩ P C		
4	1903 NOLLY DRII	VE			
		15/40 h	1-2-	DO NOT WRITE IN THIS S	PACE
	1 THMARBC	FLORIDA.	153 <i>0</i> 9	3. Date incorporated or Qualifed	
0.07	<i>/</i> _			2/241871	
⊢	Vace of Business	2a. Mailing Address	1115	4. FEI Number	Applied For
21 Suito Ant	# 01/	26 Suite Apt # 319	Trice_	591511817	Not Applicable
Suite, Apt.	. #, ety.	Suite, Apt. #, etc.	AU Z	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	fet • A	City & State		C Elization Company Films	
23 77	HARACA DINA	28 011, 0 01110	AMA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip _	Country	Zíp	Country	8. This corporation owes the current year Intan	
24 333	19-31 BROWAL	D ₂₉ 233A	30 BROWAR	Personal Property Tax.	gible ☐Yes ☐No
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered Ag	jent
a	- ROTHY OF		81 Name		
[[a]	Elect Deland	•	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
U	90 3 Hally Orer	ب .	On Edit Mile	(i.e. box radiiber is not receptable)	
'	FROM ROTHKPF Go & Hally Drug TAMARAC, F	Laner DA 7331	9 83		
	THAT HAVE ,T	2.18	84 City	1.17	85 Zip Code
				FL	_
11. Pursuant	to the provisions of Sections 67.0502	2 and 607.1508, Florida Stat	tutes, the above-named cor	rporation submits this statement for the purpose of ch	anging its registered
agent, I a	am familiar with, and accept the obligat	on Florida. Such change was	Florida Statutes.	rporation submits this statement for the purpose of chition's board of directors. I hereby accept the appointr	nent as registered
SIGNATURE	1 John John	0 2/ 1		2114/	1999
	Signature, typed or printed name of registered agen		TE: Registered Agent signature requi		DIDECTORS IN 42
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	KKBA A	☐ DELETE	1.1 TITLE	l	Change Addition
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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 percent 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 on an adactment with an address, with all other like empowered.

SIGNATURE:

NING OFFICER OR DIRECTOR