SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name

FILED Jul 07, 1999 8:00 am Secretary of State

07-07-1999 90012 014 ***550.00

NESTOF	R LIQUIDATING CORP.	4/01/5	/99					
								81811 81811 81811 81811 1881
Principal Place		Mailing Address						
7337 BRYAN DAIRY RD		P O BOX 1650 Pinellas Park FL 33780-650		l				
LARGO FL 33777 US		US			DO NOT WRITE IN THIS SPACE			
00		00				3. Date Incorporated or Qualified		
						07/16/1971		
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-1355840		Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	ت	\$8.75 Additional
22						5. Celtificate of Status Desired		Fee Required
City & State	9	City & State				6. Election Campaign Financing	٦.	\$5.00 May Be
23		28				Trust Fund Contribution	╝	Added to Fees
Zip	Country	Zip	Сог	untry		8. This corporation owes the current ye		. 53
24	25	29	30			Intangible Personal Property.		Yes 🛛 No
	9. Name and Address of Curren	t Registered Agent		1		10. Name and Address of New Regist	tered Ag	ent
NES	STOR, BRIAN	,		81	Name			
	7 BRYAN DAIRY ROAD			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
	GO FL 33777							
DAN	GO 1 E 33///			83		Λ.		}
				84	City			85 Zip Code
							<u>FL</u>	
			$\overline{}$				a of chan	ning its registered
11. Pursuant	to the provisions of sections 607.0502	2 and 607.1508, Florida Statu	tes, the ab	bove-n	amed corp	poration submits this statement for the purposition's board of directors. I bereby accept the	annointr	ent as registered
office or r	registered agent, or both, in the State	of Florida. Such change was	autnorize	εα ον τ	ne corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the	appointm	nent as registered
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was	autnorize	εα ον τ	ne corpora	poration submits this statement for the purpos- ation's board of directors. I hereby accept the	appointm	ent as registered
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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 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, and an attachment with an address.

SIGNATURE:

NATURE REQBERAND NESTOR

727-544-6114