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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 404248



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90050 019 \*\*\*150.00

THOMAS	S VENA REALTY, INC.				
				T TROUGH AND A COUNT DIRECT CONTRACTOR OF THE COUNT OF TH	ANDIN 410H BIRNI 250H BIRNI 100H
Principal Plac	e of Business	Mailing Address		1 IMBIII BABLI BBUT BIRTE BIBLE ALBER ANDER TARLE WIRKE	BIELL BIBIT SION BIBIT BIBIT INDI
1401 E. 7TH A		1901 E. 7TH AVE			
SUITE 4		SUITE 4			
TAMPA FL 336	05	T <del>ampa FL 3360</del> 5	•	DO NOT WRITE IN THIS	S SPACE
US		<del>-US</del>		3. Date Incorporated or Qualifed	
				06/30/1972	
2. Principal P	lace of Business	2a. Mailing Address	the name	4. FEI Number	Applied For
21 1100	N. 5655	26 11007 N.56	-31	59-1718673	Not Applicable
Suite, Apt.	1 2	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
<u></u>		27 SUITE R	<u> </u>		Fee Required
		City & State	TAME -	6. Election Campaign Financing —	~ \$5.00 May Be
23 1 EM		28 75/1/15 151	RRACE, FO	Trust Fund Contribution	Added to Fees
Zip `	Country	' - 2º	Country	8. This corporation owes the current year In	
<u> 24 33</u>	6/1 25 1//Shokough	129 9761   31	O HILISHOROG	Personal Property Tax.	
	9. Name and Address of Current		81 Name	10. Name and Address of New Registered	Agent
VEN	A, THOMAS E		O Name		
VENA, THOMAS E  1901 E. 7TH-AVE 11007 N. 56#5T  SUITE 4  IAMPA FL 33605  TEMPLE TERRICE, FC  3 3617  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute		82 Street	Address (P.O. Box Number is Not Acceptable)		
	E4 Suitel		0.2		
	IPA FL-33605	- AME FL-	_ 83		
- Education	TEMPLE	HERIUS, 1	84 City		85 Zip Code
	.3	<u>3617                                    </u>		<u> </u>	
office or r	registered agent or both, in the State of	f Florida. Such change was auth	horized by the como	corporation submits this statement for the purpose o tration's board of directors. I hereby accept the appo	r changing its registered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	da Statutes.		
SIGNATURE					
	Signature, typed or printed name of registered agent		Registered Agent signature re		ND DIPECTORS IN 12
12.	OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	VENA, THOMAS E		1.2 NAME		
NAME	6314 MORINGMIST COURT		1.2 NAME		
STREET ADDRESS			4 A ATTECT ADDRESS		i :
CITY-ST-ZIP	TEMPLE TERRACE FL		1.3 STREET ADDRESS	•	
TITLE	CD	□ DELETE	1.4 CITY-ST-ZIP		□ Change □ Addition
NAME	SD	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	·	Change Addition
	VENA, PRISCILLA	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	· · · · · · · · · · · · · · · · · · ·	☐ 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RESIDENT 4/1/99 9854