## 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 # 459337 1. Corporation Name

NORSCO INVESTMENTS, INC.

Mailing Address Principal Place of Business 10099 PARADISE BLVD 10099 PARADISE BLVD

## **FILED** Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90007 026 \*\*\*158.75



TREASURE ISLAND FL 33706 US		TREASURE ISLAND FL 33706 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For		
<del></del>		¬ *			59-1542799	N	ot Applicable
21]		26 Suite Ant # etc	Suite, Apt. #, etc.				Additional
Suite, Apt. #, etc.		<b>⊢</b>	<del>-</del>		5. Certificate of Status Desired Fee Required		
22		27			A. Election Comparing Financing	\$5.00	May Po
City & State		City & State	¬ ·		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
23		28	0		177		101 003
Zip			Country	, M		MNo	
24	25 29 30			Felsonal Floperty Fux.			
	. 9. Name and Address of Current	Registered Agent		1	10. Name and Address of New Registered	Agent	
	The State of the S		81	Name	:		
GARE	BUTT, GEORGE W.	•	82	82 Street Address (P.O. Box Number is Not Acceptable)			
	9 PARADISE BOULEVARD		.   5		and the second s		
TREA	ASURE ISLAND FL 33706		83	-	· 包含品色 经销售的制度额		
	•					(2,303/30 	5 25 8 24 1 1 2 2 1 1 1 2 2 1 1 1 1 1 1 1 1 1
		•	84	City	FI	' 85 Zip	Code ''
entry to a con	<u> </u>	Tool 1500 Florida Statutes	the show	o pomod corr	poration submits this statement for the purpose of	changing it	s registered
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, f Florida, Such change was auth	, the abovi	the corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appo	intment as r	egistered
US agent. Lar	egistered agent, or both, in the State of m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statutés	j. ,	• •		}
					<u></u>		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: R				nt signature require	ed when reinstating) DATE	<u></u>	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PSTD	☐ DELETE	1.1 TITLE		**************************************	Change	Addition
NAME	GARBUTT, GEORGE W		1.2 NAME				,
STREET ADDRESS	10099 PARADISE BLVD	-	1.3 STREE	T ADDRESS	•		
	TREASURE ISLAND, FL00000 3	3706	1.4 CITY-S	T-ZIP			
CITY-ST-ZIP	VPD	☐ DELETE	2.1 TITLE			Change	e ☐ Addition
TITLE	VFD . —		2.2 NAME				
NAME	GARDOTT, SOAN			T 1 DODE OF			
STREET ADDRESS			2.3 STREET ADDRESS			•	• • • •
CITY-ST-ZIP	TREASURE ISLAND FL 33706		2.4 CITY-	ST-ZIP		☐ Change	Addition
TITLE (1.63)	941 (-3087)	☐ DELETE	3.1 TITLE			□ 'ounde	, , , , , , , , , , , , , , , , , , , ,
NAME OF STA			3.2 NAME				
		•	3.3 STREE	TADORESS	1. 人名英巴达特特克 人名英格兰		1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
CITY-ST-ZIP	SOF FLARE A DITTE		3.4. CITY-	ST-ZIP		of the second	1. 出版的
TITLE		☐ DELETÉ	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	e∷ '⊡ Addition
			4, 2 NAME	:			
NAME 107 St	K. S. C.			T ADDRESS	•		İ
STREET ADDRESS				i			1
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	51-ZIP		Change	e ☐ Addition
TITLE		☐ DELETE	5.1 TITLE				- 1
NAME			5.2 NAME				: 1
STREET ADDRESS	No. ii wa	,		ET ADDRESS			ì
CITY-ST-ZIP	PSC		5.4 CITY-1				
TITLE	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ DELETE	6.1 TITLE	1		Change	e ☐ Addition {
NAME	10:35 97 H 407 T 7 7 3		6.2 NAME		· .		
STREET ARRIPESS	】 第四位的 拉斯伯克·阿尔克	19. T# .	6.3 STREE	ET ADDRESS			
STREET BUILDINGS							

6.4 CITY-ST-ZIP 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 an attachment with an address with all other like empowered.