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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 13, 1999 8:00am

Secretary of State

02-13-1999 90001 007 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

TRAWLER MISS SYLVIA INC

	EN MICO STEVIA, INC.				 	i a i a i a i a i a i a i a i a i a i a
Drinning Din	and Division	44-W 4.11				
	ce of Business	Mailing Address ·				
5706 34TH AV		5706 34TH AVE S.			·	
TAMPA FL 33619 TAMPA FL 33619					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	0.7.02
					07/01/1975	
2. Principal F	Place of Business	2a. Mailing Address	-		4. FEI Number	Applied For
21		26			59-1604998	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		-		\$8.75; Additional
22		27			5. Certifcate of Status Desired	Fee Required
City & Sta	te	City & State			6. Election Campaign Financing •	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Inta	
24	25	29	30		Personal Property Tax.	☐Yes ☐No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered A	
			8	1 Name	210	• 1
	HERT, DANIEL E			2 Street Addr	mon (D.O. Day Alumbas is Alex Associately)	
	6 S 34TH AVE		°	Street Addi	ress (P.O. Box Number is Not Acceptable)	
TAM	IPA FL 33619		8	3	म्बर्ग संबंध है। ब्रीहरीन संबंध से किस स	8/13/4 (S.M.) 5/6/13/4 (A.M.)
			-			
		•	. 8	4 City	E1	185 Zip Codé
11 Durguant	to the provisions of Sections 607 050:	2 and 607 1609 Elected Statute	a the abo	vo named care	oration submits this statement for the purpose of	phanaina ita ragiatarad
agent. I a	registered agent, or both, in the State of the familiar with, and accept the obligation	of Fiorida. Such change was au	itnonzed b	y the corporation	on's board of directors. I hereby accept the appoin	tment as registered
· · · Office of t	registered agent, or both, in the State (or Florida. Such change was au tions of, Section 607.0505, Flor	itnorized b ida Statute	y the corporations.	on's board of directors. I hereby accept the appoin	trment as registered
agent. I a	registered agent, or both, in the State of the obligation of the o	of Florida. Such change was autions of, Section 607.0505, Floritand title if applicable. (NOTE:	itnorized b ida Statute	y the corporation	on's board of directors. I hereby accept the appoin	tment 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapted, or on by attechment with an other like empowered. address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

813-626-4512