Applied For

Fee Required \$5.00 May Be

Added to Fees

□No

Not Applicable \$8.75 Additional

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

D	OCL	JM	ENT	#	50	069	1
	_				\sim	-	•

1. Corporation Name

City & State

23

24

Zip

CAMPOAMOR GUN REPAIR & SALES, INC.

Principal Place of Business	Mailing Address	
1734 TAYLOR ROAD NORTH BRANDON FL 33511	1734 TAYLOR ROAD NORTH BRANDON FL 33511	
2. Principal Place of Business	2a, Mailing Address	
21	26	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

28

29

Zip

City & State

CAMPOAMOR, MANUEL A JR.

25

Country

9. Name and Address of Current Registered Agent

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90116 040 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

04/07/1976 4, FEI Number

59-1661603

1734 TAYLOR ROAD NORTH			2 Street Address (P.O. Box Number is Not Acceptable)				
BRANDON FL 33511							
	•			85 Zip Code			
		84	City	FL			
office or re	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the egistered agent, or both, in the State of Florida. Such change was authorise familiar with, and accept the obligations of, Section 607.0505, Florida S	ea by	-named the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registr	төд Арег	signature r	equired when reinstating) DATE			
Originated types of printed			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PVTD DELETE 1.	TITLE		☐ Change ☐ Addition			
NAME	CAMPOAMOR, MANUEL JR. 1.	NAME					
STREET ADDRESS		STREET	ADORESS				
CITY-ST-ZIP	BRANDON FL 1.	4 CITY-S	-ZIP				
TITLE	SD □ DELETE 2	1 TITLE		☐ Change ☐ Addition			
NAME	CAMPOAMOR, VIRGINIA 2	2 NAME					
STREET ADDRESS	1734 TAYLOR RD. 2	3 STREET	ADDRESS				
CITY-ST-ZIP	BRANDON FL2	4 CITY-S	r-zip	77 (1)			
TITLE	DELETE 3.	1 TITLE		☐ Change ☐ Addition			
NAME	3.	2 NAME		``-			
STREET ADDRESS	3.	3 STREE	ADDRESS				
CITY-ST-ZIP		4. CITY-S	r-ZIP				
TITLE	☐ DELETE 4.	1 TITLE		☐ Change ☐ Addition			
NAME		2 NAME					
STREET ADDRESS	4	3 STREE	ADDRESS				
CITY-ST-ZIP		4 CITY-S	-ZIP				
TITLE 1		1 TITLE		☐ Change ☐ Addition			
NAME AND		2 NAME					
STREET ADDRESS			ADDRESS				
CITY-ST-ZIP		4 CITY-S	-ZIP	. ☐ Change ☐ Addition			
TITLE		1 TTTLE		☐ Change ☐ Addition			
NAME		2 NAME					
STREET ADDRESS			ADDRESS				
CITY-ST-ZIP		4 CITY-S		1 - Court 440 07/20/2) Elegide Chabitag I further certify that the information			
14. Thereby of	perity that the information supplied with this filling does not quality for the G	xempt	un state	in Section 119.07(3)(i), Florida Statutes. I further certify that the information			

Country

81 Name

30

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.



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