PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 515590

1. Corporation	'S INVESTMENTS, INC											
Principal Place	e of Business	M	ailing Address					1 18010	i Bildt ildbi bildi i	9131 0 10113 9811 9101		IEI WIEL INUI
114 8TH AVE			35 PARK ST NO.									
ST PETE BCH F	FL 33706		PETERSBURG FL	33710								
US				•						WRITE IN TH	IIS SPACE	
							;	 Date Incor 10/01/1! 	porated or Qu 976	alifed		
2. Principal P	lace of Business	2a.	. Mailing Address	,				4. FEI Numb	er		Ap	plied For
21		26						59-1723	6 <u>70</u>		No	t Applicable
Suite, Apt.	#; etc		Suite, Apt. #, etc	C	-	-		s. Certificate	of Status Desi	red	\$ 8.75	
22	•	27						J, Commoditi		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Fee Re	quired
City & State	e		City & State					Election C	ampaign Finar	ncing	\$5.00	
23		28						Trust Fund	d Contribution		Added 1	to Fees
Zip	Country	\perp	Zip	r	Country	y	1			e current year		 .
24	25	29		30	<u> </u>				Property Tax.		☐ Yes	⊠ No
	9. Name and Address of Currer	nt Regis	stered Agent			т		0. Name and	d Address of	New Registere	ed Agent	
OCTO	RO, ROBERT L				81	Name	е		•	-	4	
					82	Stree	et Address	(P.O. Box Nu	ımber is Not A	cceptable)		
	PARK ST NO.					ļ						
	ETE, FL				83	1						
SIP	ETE FL 33710				84	City					. 85 Zip (Code
										F	L	ĺ
44 Dissessed												
office or n agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations are secured.	of Florid	da Such change i	was autho	nnzed hv	/ the con	d corporat poration's	ion submits ti board of dire	nis statement i ctors. I hereby	or the purpose accept the app	of changing its pointment as re	registered gistered
office or r	agistared agent of both in the State	of Florions of	da. Such change v f, Section 607.050	was autho 5, Florida	onzed by Statutes	the con	d corporation's representation of the corporation o	board of dire	ctors. I nereby	DATE	pointment as re	gistered
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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.

6.3 STREET ADDRESS

6.4 CITY+ST+ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90080 017 ***150.00