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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90018 033 \*\*\*150.00

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601 ROOSEVELT BOULEVARD   601 ROOSEVELT BOULEVARD     TARPON SPRINGS FL 34689-3172   TARPON SPRINGS FL 34689-317										
	100 12 07000 0172	THE ON OTHER	016 04000 01	, ,			DO NOT WRITI	E IN THIS SP	PACE	
						3	. Date Incorporated or Qualifed			
							03/17/1978			İ
2. Principal P	Place of Business	2a. Mailing Addr	ess			4	. FEI Number		Apı	plied For
21		26				59-1806292			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.						\$8.75 A	Additional
22		27				٦	. Certifcate of Status Desired		Fee Re	quired
City & Stat	le	City & State	•			6	. Election Campaign Financing		\$5.00	May Be
23		28				1	Trust Fund Contribution		Added to	
Zip	Country	Zip		Country		8	. This corporation owes the current	nt year Intang	jible	-
24	25	29	30				Personal Property Tax.			□No
	9. Name and Address of Curre	ent Registered Agent				10	. Name and Address of New Re	gistered Age	ent	
DAD	OCA IOCEDIAD			81	Name					
RAPOSA, JOSEPH D.				82	Street A	Address (	P.O. Box Number is Not Acceptab	ole)		
601 ROOSEVELT BLVD. TARPON SPRINGS FL 33589										
ייייי	FON 3FRINGS 1 E 33389			83						
				84	City			<b>—</b> i [	85 Zip C	Code
								FL`		
	to the provisions of Sections 607.05 registered agent, or both, in the State									
				rizen nv i	the corno			the appointm	enias red	usterea i
agent. I a	m familiar with, and accept the oblig	pations of, Section 607.0	ge was author 0505, Florida (	Statutes.	the corpo	oration 5 b	loard of directors, I hereby accept	tne appointm	ent as reg	gisterea
agent. I a		gations of, Section 607.0	)505, Florida (	Statute's.					ent as reg	gistered
agent. I a	Signature, typed or printed name of registered ag	pations of, Section 607.0	)505, Florida S (NOTE: Regis	Statute's.		equired when	reinstating)	DATE		.
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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: