PKUFII CORPORATION ANNUAL REPORT

GANT, TOBY R.

10215 PARSONS STREET TAMPA FL 33615



g. Name and Address of Current Registered Agent

FLORIDA DEPARTMENT UP STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999 **DOCUMENT #**

TOBY R. GANT AND ASSOCIATES, INC.

Principal Place of Business Mailing Address 10215 PARSONS ST 10215 PARSONS ST TAMPA FL 33615 TAMPA FL 33615 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/22/1978 A FEI Number Principal Place of Business Mailing Address 59-1805340 21 28 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 27 City & State City & State 6. Election Campaign Financing Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Country Zip ☐ Yes Intangible Personal Property. 29 25 24

Pursuant to the provisions of sections 807.0502 and 807.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 807.0505, Florida Statutes.

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Signer) orac	Signature, typed or privated name of registered agent and title 2 applicable	e. (NOTE:	Registered Agent signets	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1,1 TITLE	Change Addition
KAME	GANT, TOBY R.		1.2 NAME	} !
STREET ADDRESS	10215 PARSONS STREET		1.3 STREET ADDRESS	
спу-вт-де	TAMPA FL 33615		1.4 CITY-ST-ZIP	<u> </u>
TITLE		DELETE	2.) TILE	Change Addition
NAME			2.2 NAME	ĺ
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZP			24 CITY-ST-ZIP	
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NAME			12 HAME	
STREET ADDRESS			23 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-5T-ZP	
TITLE		DELETE	4 1 MLE	Change L Addition
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STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CTY-81-ZIP	
TITLE		DELETE	5.1 TITLE	Change L Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-\$1-20P			5.4 CITY-ST-ZIP	
TILE	_ · · · · · · · · · · · · · · · · · · ·	DELETE	6.1TILE	☐ Change ☐ Addition
HAKE			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	·
CITY-ST-ZP			8.4 COTY-81-ZEP	
44 I hereby o	with that the information supplied with this filing does	not qualify for the	ni belata Aditamexe	section 119.07(3)(i). Florida Statutes. I further certify that the information

I nerety certify mak the information supplied with this laring does not quality for the exemption susted in section 1.19.07(3)(i), Frontal Statutes - regular certify that it is indicated on this annual report or suppliemental annual report is true and section and that my signature shall have the same logal affect as if made under only that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Floride Statutes; and that my name appears

7/8/1999 813-888-6545

FILED Jul 14, 1999 8:00 am **Secretary of State**

07-14-1999 90004 043 ***150.00

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Bo

Added to Fees

No.

Zip Code

Not Applicable

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

600743-90009-16

Toby R. Gant & Associates Inc.

10215 Parsons Street Tampa, Florida 33615-2623

July 20, 1999

Florida Department of State Annual Reports Filing PO Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

I submitted my annual report late on July the eight because I never received the original notice. I enclosed a letter-requesting waiver of the four hundred dollars late fee, see attached copies. I have been in good standing for over three years, and I would appreciate your considering or reconsidering my request for a waiver.

Thanks for your help in this matter.

Sincerely,

Toby R. Gant President