Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90004 007 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 583790

1. Corporation Name

BASTED	U, INU.								
Principal Place	e of Business	Mailing Address				-		TIMEL MINIC ACASE A	
537 DOUGLAS AVE 537 DOUGLAS AVE								•	
SUTE 17E SUTE 17E									
DUNEDIN FL 34698 DUNEDIN FL 34698						DO NOT WR		SPACE	
us us						3. Date Incorporated or Qualifed	i		
						08/30/1978			-Und Fan
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		, , , , , , , , , , , , , , , , , , ,	plied For
21		26				59-1873017		\$8.75 A	t Applicable
Suite, Apt.	#, etc.	<del></del>	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Fee Re	
22		City & State							<del></del>
City & State	e	<b>⊢</b> ′				6. Election Campaign Financing Trust Fund Contribution		<b>\$5.00</b> Added to	
23 Tim	Country	Zip	Countr	v		8. This corporation owes the cut	ront year in		31000
Zip		<del></del>	30	,		Personal Property Tax.	rem year m	Yes	☑No
24	9. Name and Address of Curren		30			10. Name and Address of New	Registered		
	5. Name and Address of Curren	it registared rigent	8	I Na	ame				
BELJ	MONTE, MICHAEL			_					
1549 SAN ROY DR			82	2  St	reet Addre	ss (P.O. Box Number is Not Accep	table)		
	EDIN FL 34622		8:	3					
50.,									
			84	Ç	ty		FL		Code
	to the provisions of Sections 607.050	20 4 007 1509 Florido Statuto	a the ebe	<u> </u>	mod corpo	ration submits this statement for the			registered
office or r	egistered agent, or both, in the State	of Florida. Such change was au	itnorized by	/ tne	corporation	's board of directors. I hereby acce	pt the appo	intment as re	gistered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statute	S.					
SIGNATURE		MOTE	Denistand Ac	ant eige	ntura required	when reinstating)	DATE		
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	an angi	and required	ADDITIONS/CHANGES TO O		ND DIRECTO	RS IN 12
TITLE	P	☐ DELETE	1.1 TITLE			, <u></u>		Change	Addition
NAME	SWEETIN, JAMES		1.2 NAME						
STREET ADDRESS	3901 104 AVENUE N		1.3 STREI		RESS				
	CLEARWATER FL 33762		1.4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE			2.1 TITLE					Change	☐ Addition
				2.2 NAME					
NAME			2.3 STREE		DE66				
STREET ADDRESS			2. 4 CITY-		Ť				
CITY-ST-ZIP		☐ DELETE	3.1 TITLE					[] Change	☐ Addition
TITLE			3.2 NAME			•		_ ,	_
NAME			3.3 STRE		DC e e				
STREET ADDRESS									
CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE					[] Change	Addition
TITLE									
NAME			4. 2 NAME		DF00				
STREET ADDRESS			4.3 STRE						
CITY-ST-ZIP		☐ DELETE	4.4 CITY-		<u> </u>			Change	Addition
MILE		- Dette le	. 5.1 TITLE 5.2 NAME						Ų.
NAME			5.3 STRE		RESS				
STREET ADDRESS			5.4 CITY-						
CITY-ST-ZIP		☐ DELETE	6.1 TITLE					Change	Addition
TITLE		□ vereic	6.2 NAME					٠٠٠٠٠٠٠٠ ب	
NAME					прес				
STREET ADDRESS	I		6.3 STRE	CIADU	ræss í				

14. I hereby certify that the information supplied with this filing didicated on this annual report or supplemental annual report. s not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an a empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address, with all other like empowered. officer or director of the corp Block 12 or Block 13 if char

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-\$T-ZIP