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**

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90005 039 ***150.00

DOCUMENT # 604424 1. Corporation Name

CHEVES	& RAPKIN HOLDING CON	<i>I</i> IPANY							
Principal Place	of Business	Mailing Address		_		- Same and the state of the s	AL BURK BYRN BU	AN BABA B	LAIT ATOM (AA)
Principal Place of Business Mailing Address 225 HIGH PT DR VENICE FL 34292 US Mailing Address 225 HIGH PT DR VENICE FL 34292 US						DO NOT WRITE I	N THIS SPA	CE	
						06/14/1973			Ì
2. Principal Place of Business 2a. Mailing			ling Address			4. FEI Number Applied For			
21		26				59-1428151		No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			dditional
22		27				5. Community of Clother Bearing		Fee Re	
City & State	9	City & State				6. Election Campaign Financing			May Be
23		28	C	intry		Trust Fund Contribution		Added to	orees
Zip	Country	Zip	30	ar iur y		This corporation owes the current Personal Property Tax.			□No
24	9. Name and Address of Curre	29 Agent	[30]	Τ.—		10. Name and Address of New Regi			
	3. Name and Address of Gare	nt trogiotores rigent		81	Name		-		
RAPI	KIN, HARRY				C4	(D.O. Boy Number in Not Acceptable			
225 HIGH PT DR				82	Street Add	ress (P.O. Box Number is Not Acceptable	,		
VENICE FL 34292				83					
				-	Cir.		85	Zip C	`ode
				84	City		FL °	2100	,oue
office or n agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	e of Florida. Such change wa ations of, Section 607.0505,	is authorized Florida Stat	d by tutes	the corporati	poration submits this statement for the pur on's board of directors. I hereby accept the	pose of chan- e appointmen	nt as rec	gistered
	Signature, typed or printed name of registered age	ent and title if applicable. (N ND DIRECTORS	OTE: Registered		nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC		RECTO	RS IN 12
12.	VP OFFICERS A	DELETE				ADDITIONS/CHANGES TO OFFIC		Change	☐ Addition
NAME	CHEVES, JR., CHARLES J.		1.2 N				_	_	
STREET ADDRESS	120 CASTILE ST.				T ADDRESS				
CITY-ST-ZIP	VENICE FL			ITY-S					
TITLE	P	☐ DELETE						Change	Addition
NAME	RAPKIN HARRY M.		2.2 N	AME					
STREET ADDRESS	225 HIGH POINT DRIVE		2.3 S	TREE	TADDRESS				
CITY-ST-ZIP	VENICE FL		2.40	CITY-S	ST-ZIP	وريونيونيون			
TITLE		☐ DELETE	3.1 T	ΠLE				Change	☐ Addition
NAME			32 N	AME					
STREET ADDRESS			3 3 S	TREE	T ADDRESS				
CITY-ST-ZIP					ST-ZIP				□ Addison
TITLE		☐ DELETE					□'	Change	☐ Addition
NAME			4. 2 N						
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP		☐ DELETE			T-ZIP			Change	[]] Addition
TITLE		ריז מכנבוב	5.1 TI 5.2 N			•		, wigo	, ,oo,aon
ALABAT.			₩ J.Z IV	- WTIL	1				

CITY-ST-ZIP 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

Change

Addition