

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 # 613625

1. Corporation Name
INSTA-DROP, INC.

Principal Place of Business

~~625 SE 5TH AVE~~
~~MELROSE FL 32666~~
US

Mailing Address

~~625 SE 5TH AVE~~
~~MELROSE FL 32666~~
US

2. Principal Place of Business

21 ~~100 Harbor Place~~

Suite, Apt. #, etc.

22 402

City & State

23 Dadeville, Alabama

Zip

24 36853

Country

25 USA

2a. Mailing Address

26 100 Harbor Place

Suite, Apt. #, etc.

27 402

City & State

28 Dadeville, AL

Zip

29 36853

Country

30 USA

9. Name and Address of Current Registered Agent

GILBERT, ROM CPA

~~4210 NW 37TH PL, STE 200~~

~~GAINESVILLE FL 32600~~ Keystone Heights,
FL 32656

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P
STREET ADDRESS SMILEY, JACK V
CITY-ST-ZIP 625 SE 5TH AVE
MELROSE FL

TITLE ☐ DELETE

NAME ST
STREET ADDRESS SMILEY, LINDA R.
CITY-ST-ZIP 625 SE 5TH AVE
MELROSE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 100 Harbor Place # 402

1.4 CITY-ST-ZIP Dadeville, AL 36853

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 100 Harbor Place # 402

2.4 CITY-ST-ZIP Dadeville, AL 36853

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE:

Linda Smiley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-99

Date

256-825-2971

Daytime Phone #

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90138 019 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/16/1979

4. FEI Number

59-1898670

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

CR2E034 (11/98)