### PROFIT CORPORATION ANNUAL REPORT

1999



### FLORIDA DEPARTMENT OF STATE

#### Katherina Harris

Secretary of State

DIVISION OF CORPORATIONS

# DOCUMENT # 621754

PINK HOUSE, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

}		
Principal Place of Business	Malling Address	
5535 U.S. 27 SOUTH SEBRING FL 33870	. 5535 U.S. 27 SOUTH SEBRING FL 33870	

Country

9. Name and Address of Current Registered Agent

25

HAVLOCK, RICHARD A.

5535 US 27 SO SEBRING FL 33870 2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

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## FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90058 006 \*\*\*150.00

DO NOT WRIT  3. Date incorporated or Qualified	E IN THIS	SPACE	
05/15/1979			
i. FEI Number		$\neg$	Applied For
59-1948807			Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required	
5. Election Campaign Financing Trust Fund Contribution		\$5.00 May Ba Added to Fees	
This corporation owes the curre     Personal Property Tax.	nt year int	angible Yes	□N₀
D. Name and Address of New R	egistered i	Cont	
HAVLOCK			
(P.O. Box Number is Not Accepta . 32 Journ	DIE)		

City SEBRING 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's tuch change was tign 607.0505, Fi SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. ☐ Addition [] Change DELETE 11 mr TITLE PD 12 NAME HAVLOCK, RICHARD A NAME 1.3 STREET ADDRESS 5535 US 27 S STREET ADDRESS 1.4 CITY-ST-ZIP SEBRING FL 33870 CITY-ST ZIP []Change Addition DELETE 21 TITLE TITLE 22 NAME HAVLOCK, MILDRED A NAME 5535 US 27 SO 2.3 STREET ADDRESS STREET ADDRESS SEBRING FL 33870 2.4 CITY-ST-ZIP CITY-ST-ZIP [] Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Accition □ D€LETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZP ☐ Ad-tition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CTTY-ST-29 Addition ☐ Change 6.1 TITLE ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 CITY-ST-ZIP

Country

82

83

MILDRED

Street Address

30

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 eath; 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:

MULDIED HAWISCED MIDDED HAVLOCK

4/5/99 J (941) 382-1117

CR2E034 (11/98)