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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

	•
Principal Place of Business	Mailing Address
530 FIRST AVENUE NORTH	3530 FIRST AVENUE NORTH
ST. PETERSBURG FL 33713	ST. PETERSBURG FL 33713

## FILED Feb 26, 1999 8:00 am Secretary of State

	1999	DIVISION OF CORPORATIONS					02-26-1999	90020 010 ***	150.00	
DOCU 1. Corporatio	MENT # 854	4993								
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ST. PETERSBU	RG FL 33713	ST. PI	etersburg fl 33713	}			DO NOT WP	ITE IN THIS SPACI	=	
						3. Date Incorpor				
						12/16/198				
2. Principal P	face of Business	2a. M	lailing Address			4. FEI Number		1	Applied f	or
21		26				34-134788	37		Not Appl	icable
Suite, Apt.	#, etc.	s	uite, Apt. #, etc.			5. Certifcate of	Status Desired		<b>75</b> Additio	,
22		27				S. Contribute on			e Required	
City & Stat	te `	<b>├</b>	City & State			6. Election Cam			. <b>00</b> May E	
23	0	28		Соц	otas	Trust Fund C			ded to Fee:	<del>-</del>
Zip	Country	29	ip 「	30	, my	8. This corporat		rent year Intangible Yes	i □No	1
24	25   9. Name and Address			30	-			Registered Agent		
	J. //www.d.i.c.				81 Name	//. M	2,2,2	\\_		
	.er, maurice				82 Street Addr	ess (P.O. Box Numb	tatric			
	GULF BLVD., #211				Street Addit	450 60	If Blue	1., # 2 <u>1</u>	1	
ST F	PETERSBURG FL 33706	5			83	i				
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					مدمرك اا	4 Petersk	OUT A		Zip Code <b>3370</b> (	2
11. Pursuant	to the provisions of Section	ns 607.0502 and 607.	1508, Florida Statute Such change was au	s, the al	bove-named corporation	oration submits this on's board of director	statement for the	e purpose of changing the purpose of the appointment	ng its registe as registere	ered   ed
agent. I a	to the provisions of Section egistered agent, or both, in familiar with, and accep	t the obligations of, Se	ection 607.0505, Flor	ida Statı	ites.				_	
SIGNATURE	Signature, typed or printed name of	Weller (YA	TRICIA / 11	LLER	Agent signature required	t when rejectation		1-29-9 DATE	9	-  ,
12.		FICERS AND DIRECT		13.	- Pagent agriculor redamen		HANGES TO OF	FICERS AND DIRE		12
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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:** 

727-321-6488