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

**PROFIT** CORPORATION ANNUAL REPORT

1999

CITY-ST-ZIP \*

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

## Feb 23, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State

02-23-1999 90106 044 \*\*\*150.00

1. Corporation	MEN! # <b>F449</b>	95			
	GOODSON, INC.				
+ 5					
Principal Place	of Business	Mailing Address			ALE RIBER DIGIN CERTA DIGIN FORE
2451 MCMULLE	N BOOTH RD	2451 MCMULLEN BOOTH R	D		
STE 216		STE 216		DO NOT WRITE IN THIS	SPACE .
CLEARWATER FL 33759 US		CLEARWATER FL 33759 US		3. Date Incorporated or Qualifed	
US		00		09/10/1981	
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2119477	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5, Certifcate of Status Desired	\$8.75 Additional
22		27 -	<u> </u>	2	Fee Required
City & Stat	e ·	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	Carreter	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Into	angible ☐Yes ☐No
24	25	29 Current Registered Agent	30	Personal Property Tax.  10. Name and Address of New Registered Address	
	9. Name and Address of	Current Registered Agent	81 Name	To. Harro and America	
GER	SON, RICHARD F				
2451 MCMULLEN BOOTH RD			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	Ì
STE 2 <b>45</b>			83		
CLEARWATER FL 34619					llog 7:- Codo / "
*	de la		84 City	ti ka sa Maraji di Mariji 🖺	85 Zip Code
44 Durmingt	to the provisions of Sections 6	07.0502 and 607.1508, Florida Statute	es, the above-named co	rporation submits this statement for the purpose of	changing its registered
office or r	egistered agent, or both, in the m familiar with, and accept the	e State of Florida. Such change was a cobligations of, Section 607.0505, Flor	uthorized by the corpora rida Statutes.	ation's board of directors. I hereby accept the appoin	Imeni as registered
1	Rechard & Devs		Gerson	President 1/11	/ <del>79</del>
- GIOINTONE	Signature, typed or printed name of regis	tered agent and title if applicable. (NOTE:	Registered Agent signature requ		D DISECTORS III 40
12.		ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change ☐ Addition
ıш.ε	OP DICHARD F	☐ pereie	1.1 TITLE		Courage Creation
NAME	GERSON, RICHARD F	u nn ett ada	1.2 NAME		
STREET ADDRESS	2451 MCMULLEN BOOTH	THU, SIE ZEE	1.3 STREET ADDRESS		ĺ
CITY-ST-ZIP	CLEARWATER FL	□ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
TITLE			2.2 NAME		
NAME STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	<del></del>	2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME '			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		l
CITY-ST-ZIP		•	3.4. CITY-ST-ZIP		
TILLE '	<del></del>	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME !	•		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		•	4.4 CITY-ST-ZIP		
TITLE ,		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY, ST. 7IP			5.4 CITY-ST-ZIP		

CITY-ST-ZIP 14. 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

☐ DELETE

SIGNATURE:

☐ Change

Addition