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

FILED
May 13, 1999 8:00 am
Secretary of State
05-13-1999 90027 037 ***150.00

DOCUMENT # F94215 (3) 1. Corporation Name							
PRIME AMERICAN, CORP.					- 549019 - 90027 - 37	y *	,
Principal Place of Business 3329 Starling Avenue Marianna, Fl. 32448 Marianna, Fl				enue 2448			
US	nna, ri. 32448	US	1. 3	2440	DO NOT WRITE IN THIS S 3. Date Incorporated or Qualifed 08/11/1982	SPACE	
2. Principal Pla	ace of Business	2a. Mailing Address	 ,		4. FEI Number	Ap	plied For
21		26			59-2211179	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 #	Additional
22		27			3. Certificate of Status Desired	Fee Re	quired
City & State		City & State			6. Election Campaign Financing	\$5.00	
23		28 Country			Trust Fund Contribution	Added t	o Fees
— Zip· —				у	8. This corporation owes the current year Intai		□No
24	9. Name and Address of Current		30		Personal Property Tax. 10. Name and Address of New Registered A		LINU
	9. Name and Address of Current	Registered Agent	81	Name		gent	
	TDDDDDU M D	78		N	aranjo, Dixie B.		
FEUER, JEFFREY M., P.A.				Street Add	ress (P.O. Box Number is Not Acceptable) 329 Starling Avenue		
20466 South Dixie Hwy.			83		329 Bearing Avenue		
Miami, Fl. 33189							
			84		arianna FL	85 Zip C	A R
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was authoragent. I amfamiliar with, and accept the abitrations of Section 607 0505, Florida				re-named corp the corporations.			
SIGNATURE	which no land	ICADIXIE B.			04/21/99		
Signature, typed or printed name of registered agent and refer abbicable.				nt signature require	PESIDENT DATE		
12. :	OFFICERS AND	DURECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
TITLE	PST	☐ DETE IE	1.1 TITLE	1		□ Glialige	
NAME	NARANJO, DIXTE B.		1 2 NAME	7 4800500			
STREET ADDRESS) 3329 Starling Avenue			TADDRESS	•		
CITY-ST-ZIP	Marianna, Fl.	32448	1.4 CITY-S 2.1 TITLE	ST-ZIP		Change	Addition
TITLE		DECEL	2.1 IIILE 2.2 NAME			□ Change	
NAME				T ADODCCC			
STREET ADDRESS			2.3 STREET ADDRESS 2.4 CITY- ST-ZIP				
CITY-ST-ZIP TITLE			3.1 TITLE	31-21		☐ Change	Addition
NAME	The state of the		32 NAME				_
STREET ADDRESS				TADDRESS	-		
CITY-ST-ZIP			3.4. CITY-	I			
TITLE			4.1 TITLE			Change	☐ Addition
NAME			4.2 NAME				
STREET ADDRESS			43 STREE	TADDRESS			
CITY-ST-ZIP	4.4.01		4.4 CITY-S	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		==-	
TITLE			6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME	T.000555			1
-				TADDRESS			1
CITY-ST-ZIP			6.4 CITY-S	II-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 attactment with an address, with all other like empowered.

SIGNATURE:

04/21/99

Daytime Phone #

CR2E034 (11/98)