AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F96000001216 u

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. SIGNATURE:

## **FILED** Jul 14, 1999 8:00 am Secretary of State 07-14-1999 90005 003 \*\*\*550.00

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<b>4269 JENKINS</b> CLOVER SC 29	_	CLOVER S									
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						<ol> <li>Date Incorporate</li> <li>03/08/1996</li> </ol>	d or Qualified				
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1		26				57-1008519	***		<del></del> _	Not App	
Suite, Apt. i	#, etc.	Suite,	Apt. #, etc.			5. Certificate of Sta	tus Desired		•	Addition Required	
	)		State			6. Election Campai	gn Financing			May I	
3		28				Trust Fund Contr	ribution	<u> </u>	Adde	d to Fee	s
Zip	Country	Zip		Countr	у	8. This corporation				<b>-</b>	
4	25	29		30		Intangible Person			Yes	No	
	9. Name and Address of Cu	urrent Registered A	\gent		41	10. Name and Adde	ress of New Reg	gistered Ag	gent		
044	IDOLDIL LICA			81	1 Name						
	IDOLPH, LISA			82	2 Street Add	ress (P.O. Box Number	is Not Acceptable	e)			
	7 WILD FERN DR										
UKA	INGE PARK FL 32073			83	3						
				84	4 City		4-14		85 Zi	p Code	
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