## 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

## Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90085 039 \*\*\*150.00

· Corporation	MENT # <b>F98000</b> In Name In S DIRT CHEAP, INC.	003100							***************************************	
Principal Plac	e of Business	Mailing Address					<b>  </b>	ANITA NUSAN TITAL ITALI	<b>   </b>	
PO BOX 270 Purvis MS 39475		PO BOX 270 PURVIS MS 39475				DO NOT WRITE IN THIS SPACE				
					3.	Date Incorporated of 06/01/1998	Qualifed			
	Place of Business  7. Box 711	2a. Mailing Address 26 P.O. Box 711			4.	APPLIED FOR	64-090	5809 No	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certifcate of Status	Desired	\$8.75 A	quired	
City & Stat	TIESBURG , MG	City & State  28 HATTIESBURG				Election Campaign I		\$5.00 Added t		=
Zip	Country 403 [25] USA	Zip	Cour	V5A		This corporation ow Personal Property T	ax. ·	☐ Yes	⊠No	
	9. Name and Address of Curre	nt Registered Agent		81 Name	10	Name and Address	of New Regist	ered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				82 Street	et Address (P.O. Box Number is Not Acceptable)					
PLA	NTATION FL 33324		•	83		-				
		•		84 City				FL 85 Zip (		
11. Pursuant office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the obligations.	02 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flor	es, the ab uthorized rida Statu	ove-named by the corpo tes.	corporation oration's b	on submits this statem oard of directors. I he	ent for the purpo reby accept the	ose of changing its appointment as re	registered gistered	
SIGNATURE	Signature, typed or printed name of registered ag-	NOTE:	· Danietered	Agent signature i	anured when	reinstation)	DA	ATE		-
12.		ND DIRECTORS	13.	- Iggin eight		ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRECTO	RS IN 12	ŏ
TITLE	PCD	☐ DELETE	1.1 TITLE		<b>V</b>			Change	Addition	Ξ
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			4.2 NA							

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 employered 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 of an appear with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP