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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 17, 1999 8:00am

**Secretary of State** 

02-17-1999 90031 013 \*\*\*150.00

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # G12540 1. Corporation Name

EUWANI	D HOSSELL JOHNSTON H	EALIT, INC.						
Principal Plac	on of Business	Mailing Address			-  I 1881141 8881 11848 11861 84		H OLDH BADA BADA	HAN BARA HAN
'		531 N. CITRUS AVE.				•		
			CRYSTAL RIVER FL 34428					
US US					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Quali	fed		
					12/09/1982			
<b>⊢</b> '	Place of Business	2a. Mailing Address			4. FEI Number		<b>⊢</b> ⊢ ∸	plied For
21		26			59-2242121			t Applicable
Suite, Apt. #, etc.		<u> </u>	Suite, Apt. #, etc.		5. Certifcate of Status Desire	d 🗆	\$8.75	
22		27 Cit 8 Ci-t-					Fee Re	•
City & Stat	ie	City & State			6. Election Campaign Financi	ing 🗆	\$5.00	•
23 Zin	Country	28     Zip	Country		Trust Fund Contribution		Added t	lo Fees
Zip		<u>├</u>	30	•	8. This corporation owes the	current year i	Intangible Yes	
24	25 9. Name and Address of Curre	29 Agent	30		Personal Property Tax.  10. Name and Address of Ne	w Registere		2110
	J. Name and Address of Ourie		81	Name	70. Hallo and Addices of the	. H TOBISTOIC	a Agent	
_ JOH	INSTON, EDWARD RUSSELL							
531	N. CITRUS AVE.		82	Street Addres	ss (P.O. Box Number is Not Acc	eptable)		
CRY	STAL RIVER FL 34428		83	<del> </del>		[[4]] [[4]]	16 21 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13 13 3 1 1 3 1
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			84	City	14.44.11	. F	85 Zip (	Code
						•	<b>-</b>	
11. Pursuant	to the provisions of Sections 607 05	502 and 607.1508. Florida Statu	tes, the above	e-named como	ration submits this statement for	the purpose	of changing its	registered
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State	e of Florida, Such change was :	authorized by	the comoration	ration submits this statement for i's board of directors. I hereby a	the purpose coept the app	of changing its ointment as re	registered gistered
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida, Such change was :	authorized by	the comoration	ration submits this statement for n's board of directors. I hereby a	the purpose coept the app	of changing its cointment as re	registered gistered
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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 composition on the receiver or trustee employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, pr of an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR