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PROFIT. **CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G41 1. Corporation Name

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90058 021 ***150.00

Principal Plac	e of Business	Mailing A	ddress		•								
1293 10TH ST.		P.O. BOX											
NAPLES FL 33	940	NAPLES F	L 33941		•			DO NOT	WRITE IN	THIS SPAC	CE		
	•						3. Date Incor 06/01/19	porated or Qu	alifed		-		
2. Principal P	lace of Business	2a. Mailin	ig Address				4. FEI Numb				App	lied For	g
21	•	26	·				59-2297	751		<u> </u>	.Not	Applicable	
Suite, Apt.	#, etc.	Suite,	Apt. #, etc.				5. Certifcate	of Status Desi	red 🗌		3.75 A	dditional quired	
City & Stat	e }	City 8	& State				6. Election C	ampaign Finar	ncing	\$	5.00	May Be	•
23	-	28					Trust Fund	Contribution		A	Added to	Fees	
Zip .	Country	Zip		Cou	ntry .			ration owes th	e current yea				
24	25	29	•	30	,		<u></u>	Property Tax.				□No	
	9. Name and Address of Cu	rrent Registered	Agent		041	•	10. Name and	Address of I	New Registe	ered Agent	<u>t </u>		
1100	NIE BONN D.C. TOO	4	•		81 Nam	ie	• • •						}
	GUE, RONALD C., ESO.) 8TH AVE. S., #4, BAYVIEW	BLDG.		,	82 Stre	et Addres	ss (P.O. Box Nu	mber is Not A	cceptable)				ļ
SUIT	E 4 BAYVIEW BLDG.				83		(- 4)		7.6		+ ; 2 \$ 		
NAP	LES FL 33940				84 City		\$ 15ge 3 17	**************************************	. " \c. t \ \delta \	E 85	Zip C	ode'	
office or i	edistered agent or both in the St	tate of Florida 'Suc	h change was a	uthorized	by the co	rporation	's board of dire	ctors. I hereby	accept the a	appointmen	nt as reg	istered	
	to the provisions of Sections 607 registered agent, or both, in the Strn familiar with, and accept the ob-	oligations of, Section	on 607.0505, Flo	rida Statı	utes.		n's board of directions when reinstating):	ctors. I hereby	accept the a		nt as reg	istered	a a
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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 suppliemental 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.