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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90006 006 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **G91720**

BILL SWEET PHMP COMPANY INC

DILL OV	TEET FORM COMMENTS IN				
Principal Plac	ce of Business	Mailing Address	****	1 10051113 0010 10102 11811 16018 71671 0071 018	DIA MENGENDINAN DINEN DININ DEDIK 1001
8321 36TH AVE. N. 8321 36TH AVE. N.					
ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710					
				DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualifed 03/16/1984	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2380306	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
27		· ·	5. Certificate of Status Desired	Fee Required	
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zin	Country		Country	Trust Fund Contribution	Added to Fees
Zip	Country 25		Country	8. This corporation owes the current year	Intangible ☐ Yes ☐ No
24	9. Name and Address of Curre		30	Personal Property Tax. 10. Name and Address of New Registers	
			81 Name		
4 10 10	Pers, dan A. 1 36th ave. N.		82 Street Addr	Iress (P.O. Box Number is Not Acceptable)	·
	PETERSBURG FL 33710		83		
			84 City	াৰ্শ কৰা ১৯ জনত জন্ম কৰিছে কৰিছে বিশ্ব কৰিছে বিশ্ব কৰিছে বিশ্ব কৰিছে বিশ্ব কৰিছে বিশ্ব কৰিছে বিশ্ব কৰিছে বিশ্ব বিশ্ব কৰিছে বিশ্ব কৰিছে বি	85 Zip Code
A	•				
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Statute:	s. the above-named corb	poration submits this statement for the ourbose	oi chanoino ils redistered - i
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with and agreent the oblice	602 and 607.1508, Florida Statute: e of Florida. Such change was au larons of Section 607.0505. Flori	s, the above-named corp thorized by the corporation do Statutes	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	pointment as registered
	1 1/1 // //- 1	e of Florida. Such change was au altions of, Section 607.0505, Flori	s, the above-named corp thorized by the corporation da Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	pointment as registered
11. Pursuant office or r agent, I a SIGNATURE	Signature, typed or pimiled hame of registered ago	ent and title if applicable. (NOTE: F	s, the above-named corp thorized by the corporation da Statutes. Registered Agent signature requires	237A	or changing its registered pointment as registered
SIGNATURE	Signature, typed or pimiled hame of registered age	ent and title if applicable. (NOTE: F	Registered Agent signature required	ed when reinstating); (4.55). ADDITIONS/CHANGES TO OFFICERS.	AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed or philled hame of registered agr	ent and title if applicable. (NOTE: F	Registered Agent signature required 13. 1.1 TMLE	ed when reinstating); (1995)	V 99
SIGNATURE 12. TITLE NAME	Signature, typed or pimiled hame of registered agr OFFICERS AI PD ANDERS, DAN A.	ent and title if applicable. (NOTE: F	Registered Agent signature required 13. 1.1 TITLE 1.2 NAME	ed when reinstating); (4.55). ADDITIONS/CHANGES TO OFFICERS.	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or pimiled fame of registered as OFFICERS AI PD ANDERS, DAN A. 8321-36TH AVE NO.	ent and title if applicable. (NOTE: F	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ed when reinstating); (4.55). ADDITIONS/CHANGES TO OFFICERS.	AND DIRECTORS IN 12
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14. 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 at 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP