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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # H27017

BOMARK, INC.

Principal Place of Business
309 9TH STREET S.
NAPIES EL 22040 CANA

Mailing Address

309 9TH STREET S. NAPLES FL 33940-6421

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90108 005 ***150.00



						DO NOT WRITE IN THIS	SPACE	
						3. Date incorporated or Qualifed	OI ACE	
Principa	Place of Business	2a. Mailing A				10/25/1984	-	
<u>1</u>			ooress			4. FEI Number	$ \tau$	A . II
Suite, A	pt. #, etc.	26	#			<u>59-2462224</u>		Applied For
<u>!</u>		Suite, Apt	. #, etc.					Not Applicab
City & St	tate	27 City 8 Ct				5. Certifcate of Status Desired		5 Additional Required
		City & Sta	te		_	6. Election Campaign Financing		
Zip	Country	28				Trust Fund Contribution		0 May Be
	25	Zip	_	Countr	у ——	8. This corporation owes the current year Inta	Adde	d to Fees
	9. Name and Address of Curr	[29]		0		Personal Property Tax.		
		rent Registered Agen	t			10. Name and Address of New Registered A	∐ Yes	□No
WE	AKLEY, MARK D.			81	Name	The state of the s	уделт	
880	8TH STREET S.			82	Street Add			
NAI	PLES FL 33940			-	Olleet Aug	ress (P.O. Box Number is Not Acceptable)		
				83	 -		<u> </u>	
						· ·	* * *	
				84	City		Del Zin	
Pursuant office or	to the provisions of Sections 607.05	02 and 607,1508, Flor	ida Statutes	the chour	<u> </u>	oration submits this statement for the purpose of cipn's board of directors. I hereby accept the appoint	85 ZIP	Code
agent. I a	am familiar with, and accent the oblig	e of Florida. Such char	ige was auth	orized by	the command	oration submits this statement for the purpose of ch	hanging it	s registered
NATURE	and addept the oblig	Januris or, Section 607.	.0505, Florida	Statutes.	·	oration submits this statement for the purpose of clon's board of directors. I hereby accept the appoint	ment as n	egistered
	Signature, typed or printed name of registered ag	ant and title if a life						
	OFFICERS A	ND DIRECTORS	(NOTE: Reg	istered Ageni	t signature required	d when reinstating) DATE		
	ST	AD DIVECTORS						
	OI		C1 E 777	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	300 11:40
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	WEAKLEY, ROBERT K. 900 VILLAGE PARKWAY		ELETE	1.1 TITLE	ADDRESS		Change	
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607, Florida Statutes; and that my name appears in

941-262-6336