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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # H60605

Principal Place of Business

TITLE

NAME

STREET ADDRES

SUPER SEAL PAVING, INC.

% PHILLIP FAAS % PHILLIP FAAS 3134 BAYSHORE BLVD. N.E. 3134 BAYSHORE BLVD. N.E. ST. PETERSBURG FL 33703-5504 ST. PETERSBURG FL 33703-					DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualifed 06/01/1985		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21	•	26			<b>59-2701842</b>	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State				•	6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year	Intangible	
24	25	29 30			Personal Property Tax.	☐Yes ☐No	
571	9. Name and Address of Curre	11.			10. Name and Address of New Registere	d Agent	
,	7745343°C34.37		81	Name			
FAAS, PHILLIP							
3134 BAYSHORE BLVD., N.E.			82	Street Address (P.O. Box Number is Not Acceptable)			
ST.	PETERSBURG FL 33703		83			i Aldi Bigli gigil sikil aldı isti	
		* **	84	City	The second secon	85 Zip Code	
SIGNATURE	familiar with, and accept the oblig				ired when reinstating) 19255 DATE		
12	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PST	☐ DELETE	1.1 TITLE		<b>表现的转数</b>	☐ Change ☐ Addition	
NAME	FAAS, PHILLIP	~	1.2 NAME			•	
STREET ADDRESS	3134 BAYSHORE BLVD. N.E.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-S	T- ZIP			
TITLE		☐ DELETE	2.1 TITLE	. 1		☐ Change ☐ Additio	
NAME			2.2 NAME	,		•	
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP	* 2.18%	ņ	2. 4 CITY-S	T-ZIP			
TITLE	to entry this	- DELETE	3.1 TITLÉ			Change Addition	
NAME ( 10 % C)	D. PURTE of		3.2 NAME				
STREET ADDRESS	The state of the s		3.3 STREET	ADDRESS	4.00 - 12 3- KB115 & 18 4.0 1.0 18.05	is all of the season of the state of the season of the sea	
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	一一一一一人,是那个事情的人们的人	四個情報 動間間	
TITLE		, DELETE	4.1 TITLE		1. 14. 14. 14. 14. 14. 14. 14. 14. 14. 1	: 行走 □ Change を担配 Additio	
NAME ALLIE ALS			4. 2 NAME			•	
STREET AODRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			.4.4 CITY-S	T-ZIP		·	
TITLE '-		☐ DELETE	5.1 TITLE			☐ Change ☐ Additio	
NAME .	·	•	5.2 NAME				
STREET ADDRESS	1		5.3 STREET	ADDRESS			
	Y&\$		54 CITY-S1	r. 71P	the This is		

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 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.

☐ DELETE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**FILED** 

Jan 29, 1999 8:00am

**Secretary of State** 

01-29-1999 90048 025 \*\*\*150.00

Change

☐ Addition