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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H7

1. Corporation Name

пап	AND COWFAINT, INC.					
Principal Plac	ce of Business	Mailing Address			- I SOULDEN DINK HOUSER HOUL BROKK BANDN HIDK AT	DIA BINTA DIWAY WARAT DIWA DIWAY 1001
78 DAN LAWTON AVE 4 FAIR LAKE LANE					Ì	
PORT ORANGE FL 48236 GROSSE POINTE SHORES M			Al 48236			
US					DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualifed	
					08/15/1985	
2. Principal Place of Business 2a. Mailing Address		2a. Mailing Address			4. FEI Number	Applied For
21	26				58-1664595	Not Applicable
Suite, Apt. #, etc. Suite, Apt.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
23		28				
Zip	Country Zip		Country		8. This corporation owes the current year Intangible	
24	25	29	30		Personal Property Tax.	ŬYes □No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	ed Agent .
	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		- 1	81 Name	•	
VAN HOLLEBEKE, HILLAIRE A.,JR.				00 014 4 4	, , , , , , , , , , , , , , , , , , ,	
1877 SECLUSION AVENUE			'	82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
DAYTONA BEACH FL 32014			- 1	83	LES CONTRACTOR NO SERVICE AND	
			L			2.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
			[3	84 City		85 Zìp Code
11 Dureupp	tto the provisions of Sections 607.050	2 and 607 1508. Florida Statutor	r the ab	ove named co	reportion submits this statement for the number	of changing its registered
office or	registered agent, or both, in the State	of Florida. Such change was aut	thorized	by the corpora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as registered
agent. I	am familiar with, and accept the obliga	tions of, Section 607.0505, Florid	da Statut	tes.		
SIGNATURE	·				ired when reinstating) DATE	, , , , , , , , , , , , , , , , , , , ,
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registe 12. OFFICERS AND DIRECTORS 1 1:				gent signature requi	ired when reinstating) , ; ; ; DATE ADDITIONS/CHANGES TO OFFICERS	
TITLE	I PT	DELETE	1.1 TITL	<u> </u>	3. 3.5 (3.5°	Change Addition
	VAN HOLLEBEKE HILLAIRE JR.		1		March Market (1965)	
NAME	4077 OFCHUOION MENUE		1.2 NAW	- 1	•	
STREET ADDRESS				EET ADORESS	,	1
CITY-ST-ZIP	DAYTONA BEACH FL 32124		_	r-ST-ZIP		
TITLE	VPS	DELETE	2.1 TITL	E		Change Addition
NAME	VAN HOLLEBEKE, RACHELLE		2.2 NAM	Æ		
STREET ADDRESS			2.3 STR	EET ADDRESS		
CITY-ST-ZIP	GROSSE POINTE SHRS. MI		2. 4 CFT	Y-ST-ZIP		
TITLE NOTE !	Breitenar at. Sa i ?	☐ DELETE	3.1 TITL	E		Change Addition
NAME 5	MONTHE TO THE PARTY					
STREET ADDRESS			3.2 NAM	4E		
1347	Control of the contro			IE . EET ADDRESS	1 - 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
CITY-ST-ZIP	CONTRACTOR OF SHALL		3.3 STR	EET ADDRESS	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP TITLE	OR BROWN AND SHIT	☐ DELETE	3.3 STR	EET ADDRESS Y-ST-ZIP		
TITLE	ON BROWN STORY	☐ DELETE:	3.3 STR 3.4. CIT 4.1 TITL	EET ADDRESS Y-ST-ZIP E		から、1000年2月1日 2007年2月1日 - 100日2月1日 2007年2月1日 - 100日2月1日
TITLE NAME TO LOVE	ONE BRACE RESERVE	☐ DELETE	3.3 STR 3.4. CIT 4.1 TITL 4. 2 NAM	EET ADDRESS Y-ST-ZIP E		から、1000年2月1日 2007年2月1日 - 100日2月1日 2007年2月1日 - 100日2月1日
NAME STREET ADDRESS	ONE BRACE RESERVE	OELETE	3.3 STR 3.4. CIT 4.1 TITL 4.2 NAA 4.3 STR	EET ADDRESS Y-ST-ZIP E ME EET ADDRESS		から、1000年2月1日 2007年2月1日 - 100日2月1日 2007年2月1日 - 100日2月1日
NAME STREET ADDRESS CITY-ST-ZIP	ONE BRACE RESERVE		3.3 STR 3.4. CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CITY	EET ADDRESS Y. ST. ZIP E ME EET ADDRESS (-ST-ZIP		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	ONE BRACE RESERVE	☐ DELETE	3.3 STR0 3.4. CIT 4.1 TITL 4. 2 NAM 4.3 STR0 4.4 CITY 5.1 TITL	EET ADDRESS Y. ST. ZIP E ME EET ADDRESS /-ST. ZIP E		から、1000年2月1日 2007年2月1日 - 100日2月1日 2007年2月1日 - 100日2月1日
NAME STREET ADDRESS CITY-ST-ZIP	1984 83408 FL 3840 435 435		3.3 STRI 3.4. CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM	EET ADDRESS Y. ST. ZIP E ME EET ADDRESS /-ST. ZIP E		Change Addition

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.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TTLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

1677 32-01 131 1

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

πιε

NAME

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90033 006 ***150.00

313-886-9124

☐ Change

☐ Addition