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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90132 014 ***150.00

DOCUMENT # H83008

VETTE-PROPERTY III, INC.

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Principal Place of Business	Mailing Address								
5053-126TH AVENUE NORTH	5053-126TH AVENUE NORT	H							
CLEARWATER FL 34620 CLEARWATER FL 34620 US					DO NOT WRITE IN THIS SPACE				
US US				-	3. Date Incorporated or Qualifed				
	-				10/29/	1985			
2. Principal Place of Business	2a. Mailing Address				4. FEI Nun			\vdash	Applied For
21	26				59-26	11580			Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5 Certificat	te of Status Desired			5 Additional
22	27				3 . Continue			Fee	Required
City & State	City & State				6. Election	Campaign Financin	g 🗀		O May Be
23	28				Trust Fu	and Contribution		Adde	d to Fees
Zip Country	Zip	Cou	ntry		8. This cor	poration owes the cu	ırrent year Int		
24 25	29	30				al Property Tax.		Yes	□No
9. Name and Address of Current Re	egistered Agent				10. Name a	and Address of New	Registered	Agent	
			81	Name					
MILLER, MARYETTE			82	Street Addre	eet Address (P.O. Box Number is Not Acceptable)				
5053-126TH AVENUE NORTH					(10. Don 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.				
CLEARWATER FL 34620			83						
			84	City	·			85 Z	ip Code
			84	City			FL	. 83 -	p Code
Pursuant to the provisions of Sections 607.0502 are office or registered agent, or both, in the State of Fagent. I am familiar with, and accept the obligation.	lorida. Such change was a	uinonzec	i by ti	-named corpo he corporation	oration submits n's board of di	s this statement for thirectors. I hereby acc	ne purpose of cept the appoi	changing ntment as	registered registered
SIGNATURE									
SIGNATURE Signature, typed or printed name of registered agent and			Agent s	signature required	- 2		DATE	D DIDEO	
Signature, typed or printed name of registered agent and 12. OFFICERS AND D	DIRECTORS	13.		signature required	- 2	NS/CHANGES TO C			
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6.4 CITY-ST-ZIP 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.

SIGNATURE: