PROFIT CORPORATION ANNUAL REPORT 1999

THREE SQUARES, INC.

1, Corporation Name

DOCUMENT # **H89852**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90010 029 ***150.00



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	•					_			
Principal Place	e of Business	Mailing Address							1011 01011 1001
C/O GILBERT S	STERLING	C/O AUSTIN W. STERI	LING						
5699 - 34TH ST	4322 50TH PLACE SOL								
ST. PETERSBURG FL 33714 ST. PETERSBURG FL 33711						DO NOT WRITE IN THIS SPACE			
US						3. Date Incorporated or Qualifed			
						12/13/1985			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		 	plied For
21		26				59-2095482			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A	
22		27			- ,	ت ما الما الما الما الما الما الما الما		Fee Re	quired
City & State	e · ·	City & State				6. Election Campaign Financing		\$5.00	
23	·	28				Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Cou	ıntry		8. This corporation owes the curr	ent year Inta		_ [
24	25	29	30			Personal Property Tax.			₹ No
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New F	legistered /	Agent	
0755	N. N.O. OH DEDT 11			81	Name				(
	RLING, GILBERT H			82	Street Addre	ss (P.O. Box Number is Not Accepta	ible)	·	
	- 34TH ST., N.					- dulios (1 .o. sox rights)			
ST. P	PETERSBURG FL 33714			83					
				84	Cit.			85 Zip (`ada
				**	City	•	FŁ	103 2.0	,,,,,
11. Pursuant t	to the provisions of Sections 607.0	0502 and 607.1508, Florida St	tatutes, the a	bove	-named corpo	ration submits this statement for the	purpose of	changing its	registered
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such change w ligations of Section 607.0505	as authorized Florida Stati	i by t utes.	the corporation	's board of directors. I hereby accep	it the appoin	itment as re	gistered
·	till terminal tilling and absorpt are ex-		, , , , , , , , , , , , , , , , , , , ,						ì
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (I	NOTE: Registered	l Agent	t signature required	when reinstating)	DATE		
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12
TITLE	DST	☐ DELETI	E 1.1 TI	TLE		•		Change	☐ Addition
			12 N	AME		•			1
NAME	Sterling, Patricia a.		1.210						
	STERLING, PATRICIA A. 4322 50TH PLACE SO.			TREET	ADDRESS				
STREET ADDRESS	4322 50TH PLACE SO.		1.3 ST		ADDRESS -ZIP	·)
STREET ADDRESS CITY-ST-ZIP	4322 50TH PLACE SO. ST. PETERSBURG FL	☐ DELETI	1.3 ST	TY-ST				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE	4322 50TH PLACE SO. ST. PETERSBURG FL P	☐ DELETI	1.3 ST 1.4 CE E 2.1 TI	TY-ST				Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	4322 50TH PLACE SO. ST. PETERSBURG FL P STERLING, GILBERT	☐ DELETI	1.3 ST 1.4 CE E 2.1 TT 2.2 N/	ity-st Tle Ame	-ZIP			Change	Addition
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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:

GILBERT STERLING

PRESIDENT

2/05/99

Date

Daylime Phone #