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

**PROFIT** CORPORATION ANNUAL REPORT

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 09, 1999 8:00 am Secretary of State

1999		    -	- 03-09-1999 90121 01	7 ***150.00	
DOCUMENT # .11670	5				
Corporation Name		}			
MUD PROPERTIES, INC.		1		(	
	Mailing Address			•	
Principal Place of Business	1501-15 COURT	Ì	DO NOT WRITE IN TH	HIS SPACE	
501-15 COURT	PALM BEACH GARDENS FL 33410			3. Date Incorporated or Qualifed	
ALM BEACH GARDENS FL 33410	US		05/28/1986	The first Ear	
JS			4. FEI Number	Applied For Not Applicable	
	2a. Mailing Address		59-2692895	\$8.75 Additional	
2. Principal Place of Business	1 GARDEN	<u>57</u>	5. Certificate of Status Desired	Fee Required	
11 // /2/7///	Suite, Apt. #, etc.			\$5.00 May Be	
Suite, Apt. #, etc.			6. Election Campaign Financing	Added to Fees	
22 APT 107 City & State	City & State  28 TEQUESTA	FL	Trust Fund Contribution  8. This corporation owes the current year	ar Intangible	
Tradesta Pl	28 JE Q (E ) / F	Country			
Zip Country	- 22.16Q  20		10. Name and Address of New Regist	ered Agent	
	29 37YO7		10. Hamo area		
24 33 76 9   25   9. Name and Address of (	Current registates	81 Name	Number is Not Acceptable)	1.00	
		82 Street Add	ress (P.O. Box Number is Not Acceptable)	/8 /	
DSCHIDA, MICHAEL J.		83	Areven		
1501-15 COURT PALM BEACH GARDENS FL 3:	3410	11		FL 85 710 Code 33 769	
PALM BEACH CHARDETTO		84 City	15TA	FL 33 Y67	
		the above-named col	rporation submits this statement for the purp	appointment as registered	
11. Pursuant to the provisions of Sections office or registered agent, or both, in the agent. I am familiar with, and accept in	607.0502 and 607.1508, Florida Statutes,	orized by the corpora	tion's board or directors.	4/98	
11. Pursuant to the proviser, or both, in the office or registered agent, or both, and accept the	ne State of Florida, Such 6,7,0505, Florida ne obligations of, Section 607,0505, Florida	Statutes.		DATE	
agent. I am familiar with, and accept the	(MATE: Re	gistered Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12	
CICNIATURE	violeted agent and title if application	13.	DC-C	Change Addition	
12. OFFIC	CERS AND DIRECTORS	1.1 TITLE	DOYLE KELLA	/	
TITLE PST		1.2 NAME	DOYCE KELLAN 11 GARDEN ST. APT 1	707	
NAME KELLA, JOYCE			TEQUESTA , FL 3346	9 □ Change □ Additio	
LI LEGA 45 COLIDE	NO EL 00410	1.4 CITY-ST-ZIP	160063714	☐ Change ☐ Additio	
STREET ADDRESS 1501-13 COUNT CITY-ST-ZIP PALM BEACH GARDE	DELETE	2.1 TITLE			
TITLE		2.2 NAME	•		
NAME		2.3 STREET ADORESS		☐ Change ☐ Additi	
STREET ADDRESS		2. 4 CITY-ST-ZIP 3.1 TITLE			
CITY-ST-ZIP	DELETE	3.1 (IILE 3.2 NAME			
TMLE		3.3 STREET ADDRESS			
NAME		3.4. CITY-ST-ZIP		☐ Change ☐ Add	
STREET ADDRESS	DELETE	4.1 TITLE			
CITY-ST-ZIP		4.2 NAME			
TITLE		4.3 STREET ADORESS	; (		
NAME OTOECT ADDRESS		4.4 CITY-ST-ZIP		Change Add	
STREET ADDRESS			1		

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 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 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 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 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 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 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 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 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 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 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 supplied with that I am an output supplied with the information supplied with the in **8.3 STREET ADDRESS** NAME STREET ADDRESS CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

DELETE

☐ Change

☐ Addition