Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90060 021 ***150.00

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 # 104652

1. Corporation					
Principal Place of Business Mailing Address					F JESTRIC DIES FIRST DIES DER BEIDE LIEF BEGER DEUT DES FREIE DEUT DE FREIE
2131 HIGHWAY 60 E P O BOX 1197					
LAKE WALES FL 33853 LAKE WALES FL 33859					DO NOT WRITE IN THIS SPACE
US US			•		3. Date Incorporated or Qualifed
					07/18/1986
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21		26			59-2687605 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
27					Fee Requied
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be
23	·	28	Countr		Trust Fund Contribution Added to Fees
Zip 24	_ `			у	8. This corporation owes the current year Intangible Personal Property Tax.
	9. Name and Address of Current		~1		10. Name and Address of New Registered Agent
			81	Name	
	DY, RON	•	82	Street A	Address (P.O. Box Number is Not Acceptable)
2131 HIGHWAY 60 E			02	Suboti	ridaioso (re. Dox Halindor la Het Hataphable)
LAK	E WALES FL 33853		83	3	***************************************
				1 City	85 Zip Code
1			84	1	FL ()
agent. I a	m familiar with, and accept the obligat		Registered Age		corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered equired when reinstating) DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		Ron Harly
NAME	HARDY, RON		1.2 NAME		2131 Highway 60 E
STREET ADDRESS	1365 N.E. WAVELAND AVE.	•		ET ADDRESS	who wells Flo. 338583
CITY-ST-ZIP	JENSEN BEACH FL	□ pri str	1.4 CITY-\$T-ZIP		TA Attaco Addition
TITLE	·V	☐ DELETE	2.1 TITLE	1	Jose Hardy 2131 Highway 60E XakeWales, Fla: 33853
NAME	HARDY, JOSIE		2.2 NAME		2121 Hichway 60E
STREET ADDRESS	1365 N.E. WAVELAND AVE.			ET ADDRESS	2.6.10cm C/c 33853
CITY-ST-ZIP	JENSEN BEACH FL	☐ DELETE	2. 4 CITY- 3.1 TITLE		Change Addition
TITLE		C DEFEIG	3.1 IIILE 3.2 NAME	ì	
NAME				ET ADDRESS	
STREET ADDRESS		•		i	·
CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE		☐ Change ☐ Addition
TITLE	p ·	المال المال المال	4, 2 NAME		
NAME CTREET ADDRESS				ET ADDRESS	· ·
STREET ADDRESS	,		4.4 CITY-		
CITY-ST-ZIP TITLE		☐ DELETE	5,1 TITLE		☐ Change ☐ Addition
NAME	,		5.2 NAME	}	• •
STREET ADDRESS			5.3 STREI	ET ADDRESS	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	·
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
CTOCCT ADDDESS			6.3 STREI	ET ADDRESS	

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 champed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP