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

PROFIT CORPORATION ANNUAL REPORT 1999 🎏

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

1375 JACKSON ST

US

21

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FORT MYERS FL 33901



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 154078 NUCKOLLS, JOHNSON & BELCHER, P.A.

> Mailing Address P O BOX 2199 FORT MYERS FL 33902

> > 2a. Mailing Address

City & State

Suite, Apt. #, etc.

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27

FILED Jan 20, 1999 8:00am **Secretary of State**

01-20-1999 90003 041 ***150.00



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

01/28/1987

59-2774120

4. FEI Number

Į.					Trust Fund Co		Added to	
Zip	Country Zip		Cou	ntry	8. This corporation owes the current year Intangible			
	25	29	30		Personal Prop			
	9. Name and Address of Current	Registered Agent		Od Name	10. Name and Ad	Idress of New Regi	areten whate	
	Ada Alba Alba Alba Alba Alba Alba Alba Alb			81 Name				
JOHNSON, KARL L 1375 JACKSON ST				82 Street Address (P.O. Box Number is Not Acceptable)				
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STE.	303			83			国际总统	
FOR	T MYERS FL 33901			84 City			85 Zip C	ode
				'			FL	
1. Pursuant i	to the provisions of Sections 607 0502	and 607.1508, Florida	Statutes, the a	bove-named co	rporation submits this s	tatement for the pur	pose of changing its:	registered.
	to the provisions of Sections 607.0502 egistered agent; or both, in the State or familiar with, and accept the obligation				mon's board of director		e appointment, es res	
. agent. I ai	m ramiliar with, and accept the obligation	Ala oi, decilori cor loco	o, i , , , , , , , , , , , , , , , , , ,			<.		٠,,
IGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registered	Agent signature requ	ired when reinstating)	· ·	DATE	
<u>2.</u>	OFFICERS AND		13.		ADDITIONS/CI	HANGES TO OFFIC	ERS AND DIRECTO	
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DOW CONTROL KARL L. JOHNSON, RESIDENT 14/99 941-334-3400