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**

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90053 046 ***150.00

DOCUI 1. Corporation 7 R'S, IN				140010111 011 00101 11010 11001 01111 1001	, 8 1811 21317 81871 81	3 11 3 1 3 27 (33)	
Principal Place	e of Business	Mailing Address 4838 31 AVE N					
4830 31 AVE N ST PETERSBUR	G FL 33713	ST PETERSBURG FL 33713					
				DO NOT WRITE IN THI 3. Date Incorporated or Qualifed	S SPACE		1
				11/09/1987			
2. Principal Pl	lace of Business	2a. Mailing Address		4, FEI Number	Apr	olied For	
21		26		59-2856962		Applicable	-
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A Fee Red		
22		27.		<u> </u>			 ~=
City & State	е	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to		ĺ
Zip	Country		Country	8. This corporation owes the current year !		31003	1
219	25	· _	0	Personal Property Tax.	∏Yes	(AHO	
24	9. Name and Address of Current		<u> </u>	10. Name and Address of New Registere	d Agent		1
		`	81 Name				
ROVEGNO, D.			82 Street Addre	ess (P.O. Box Number is Not Acceptable)		~	بهنة
4838 31 AVE N			UZ Olicel Addin	Coo (1.0. Box Hallison o Hot Hoopaste)			
ST PETERBURG FL 33713			83				İ
•			84 City		. 85 Zip C	ode	1
	The second secon		111	F			
=11. Pursuant	to the provisions of Sections 607.0502	2 and 607-1508, Florida Statutes	, the above-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its recintment as rec	registered sistered	İ
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florid	la Statutes.	and an amount of the second second second second			
SIGNATURE	<u> </u>			d when reinstating) DATE			}
) · · ·	Signature, typed or printed name of registered agen	**	egistered Agent signature required	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	RS IN 12	6
12	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS /	☐ Change	Addition	3
	ROVEGNO, DONALD	Appared — ——— · —	1.2 NAME		_		
STREET ADDRESS	4838 31 AVE N		1.3 STREET ADDRESS				[6
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CITY-ST-ZIP				6
TITLE	011212100011012	☐ DELETE	2.1 TITLE		Change	Addition	(
NAME	,		2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	•		2. 4 CITY-ST-ZIP	<u></u>			
TITLE		☐ DELETE	3.1 TITLE		☐ Change	☐ Addition	{
NAME			3.2 NAME				
STREET ADDRESS			33 STREET ADDRESS				==
CITY-ST-ZIP			3.4. CITY-ST-ZIP			T A Lee	-
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition	
NAME			4,2 NAME				1
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change	☐ Addition	1
TITLE		€ nere+e	5.1 TITLE 5.2 NAME	-	- Silangs		
NAME			5.3 STREET ADDRESS		•		
STREET ADDRESS			5.4 CITY-ST-ZIP				
CITY-ST-ZIP T/TLE		☐ DELETE	6.1 TITLE		☐ Change	Addition	1
NAME		<u> </u>	6.2 NAME				-
ETBEET ADDRESS			6.3 STREET ADDRESS				

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 of an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: