

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  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90187 023 \*\*\*150.00

DOCUMENT # K28173

1. Corporation Name  
P.E.I. EXPORT, INC.

Principal Place of Business  
6429 FOREST LAKE DRIVE  
ZEPHYRHILLS FL 33540

Mailing Address  
6429 FOREST LAKE DRIVE  
ZEPHYRHILLS FL 33540



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/05/1988

4. FEI Number

65-0110985

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 39 - TREASURE CIRCLE

Suite, Apt. #, etc.

22

City & State

23 SEBASTIAN FL

Zip

24 32958

Country

25 USA

2a. Mailing Address

26 39 - TREASURE CIRCLE

Suite, Apt. #, etc.

27

City & State

28 SEBASTIAN, FL

Zip

29 32958

Country

30 USA

9. Name and Address of Current Registered Agent

WEBB, ALLAN  
6429 FOREST LAKE DRIVE  
ZEPHYRHILLS FL 33540

10. Name and Address of New Registered Agent

81 Name

PAQUETTE, PIERRE

82 Street Address (P.O. Box Number is Not Acceptable)

39 - TREASURE CIRCLE

83

84 City

SEBASTIAN

FL

85 Zip Code

32958

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

4/30/99

PIERRE PAQUETTE

4/30/99

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME WEBB, ALLAN  
STREET ADDRESS 6429 FOREST LAKE DRIVE  
CITY-ST-ZIP ZEPHYRHILLS FL 33540

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 on an attachment with an address, with all other like empowered.

SIGNATURE: ALLAN WEBB  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/99  
Date

561-589-8665  
Daytime Phone #

CR2E034 (11/98)

0380605