FIL	E NOW: FILIN	G FEE AFTER I	MAY 1ST IS	\$550	0.00	amondod
	PROFIT CORPORATION ANNUAL REPORT 1999 FLORIDA DEPARTMENT C Katherine Harris Secretary Ci State Division of Corpora				ish I	FILED  FI
DÓCUMENT # 1/2/M/20					99 JUL 26 PM 3:59	
Principal Place of Business  1. Corporation Name  (C)   V V V V V V V V V V V V V V V V V V						
3161 Van Fren Axe.						
Nedes, FL 34112						DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified
						Oct. 13, 1988
· ·	Principal Place of Business 2a. Mailing Address					
Suite, Apt	Suite, Apt. #, etc. Suite, Apt. #, etc					5 Certificate of Status Desired  \$8.75 Additional
City & State City & State 28						6. Election Campaign Financing S5.00 May Be Added to Fees
Zıp 24	Countr 25	y Zip	_		itry	8. This corporation owes the current year Intangible  Personal Property Tax
ļ		ss of Current Registere				10. Name and Address of New Registered Agent
~	Steven F.	Delle Caxe.		Ĺ		
3161 Ven Buren Axe.						it Address (P.O. Box Number is Not Acceptable)
ŀ				l	B3	
(**)				ì	1	FL 85 Zip Code
11. Pursuant office or a	to the provisions of Sec registered agent, or both	tions 607,0502 and 607.15	508, Florida Statutes uch change was aut	, the ab norized	ove-named by the corp	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a SIGNATURE	- XTa - 10/11	of it obligations of, Sec			(C)	1 1-2
12.	Signature, typed or printed name	of registered agent and title if applic	able (NOTE Re	egistered A	gerit signature r	e required whos reinstaling) DAYs.
TITLE	President	FFICERS AND DIRECTO	DELETE	<b>4</b> ———	E	
NEWE	Steven F.	Dale Care	:			Andrew T. Smith
STREET ADDRESS	3161 Ven P. Hades FL	When Axer. 34112 =		ľ		
TITLE	1702.		☐ DELETE	2 1 TITL	E	Treesurer Change Addition
NAME STREET ADDRESS				1		
CITY-ST-ZIP						
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CITY-ST-ZIP TITLE			DELETE	6 1 TITL		☐ Change ☐ Addition
NAME				1	1	
STREET ADDRESS				•	ì	}
14. I hereby o	ertify that the information on this annual report or s	supplemental anata re lo	rt 🌬 true and accurat	e and th	at my signa	nature shall have the same legal effect as if made under oath; that I am an
officer or o	director of the corporation or Block 13 if changed, o	n or the feceive/ or thustee	e empowered to exec	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  CT 18, 1938  4. FET Number  LO5-ODBOST Not Applied For Not Applicable  6. Serticals of Status Desired  6. Election Campaign Financing  Trust Fund Contribution  Country  8. This corporation owes the current year Intengible  Personal Property Tax  10. Name  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 Individes, the above named corporation submits this statement for the purpose of changing its registered evens authorized by the corporation's board of directors. I hereby accept the appointment as registered evens authorized by the corporation's board of directors. I hereby accept the appointment as registered and the purpose of the purpose of the purpose of the appointment of the purpose of		
SIGNAT	URE: SIGNATURE	AND TYPED OR PRINTED NAME	OF SIGNING OFFICER OR	SU DIRECTO	Dalle (	(are Prairient 7/6/91 (94) 417-2688