PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # K42001

CORE D	RILLING PLUS, INC.				
Principal Place	e of Business	Mailing Address			
Principal Place of Business Mailing Address 800 ARDMORE RD WEST PALM BEACH FL 33401 WEST PALM BEACH FL 3340			01	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
				10/28/1988	
2. Principal P	lace of Business	2a. Mailing Address	-	4. FEI Number Applied For	r
21 P.O. B	ox 221691		21691	65-0091449 Not Applica	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required	al
City & State	LM BEACH, FL	City & State 28 W. PALM BE	ACH, FC	6. Election Campaign Financing Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	
24 3347	ZZ 25	29 35472 3	30	Personal Property Tax. Yes No	
	Name and Address of Current	Registered Agent	lad	10. Name and Address of New Registered Agent	
HOLL	IOU DATDION		81 Name		
	IGH, PATRICK		82 Street A	Address (P.O. Box Number is Not Acceptable) 1821 ALSecta DUB	
800 ARDMORE RD´ W. PALM BEACH FL 33401			1811 HLbeeta Aub		
W. P	ALM DEACH FL 33401		83		
			84 City	est Palm Beach FL 85 33989	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-named of	corporation submits this statement for the purpose of changing its registered	ed
office or r	egistered agent, or both, in the State on familiar with, and accept the obligations.	of Florida, Such change was aut ions of, Section 607,0505, Florid	thorized by the corpo da Statutes.	oration's board of directors. I hereby accept the appointment as registered	
					i
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature re	equired when reinstating) DATE	1
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TITLE	Para to the	D DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
	,			Change □ Ad	
TITLE	HOUGH, PATRICK		1.1 TITLE	Change □ Ad	
TITLE NAME	HOUGH, PATRICK	☐ DELETE	1.1 TITLE 1.2 NAME	P.O. Box 221691 W. PACM BEACH, FL 334722	dition
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14. I hereby certify that the information supplied with this filling 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.

6.3 STREET ADDRESS

6.4 CİTY-ST-ZIP

STREET ADDRESS

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90161 012 ***150.00