PROF CORPOR ANNUAL F <b>199</b>	RATION REPORT	Sa Sa Sa	DEPARTMENT OF S andra B. Mortham lecretary of State N OF CORPORATIC					
OCUME Corporation Name ROBALL, I	e	28 (:	(3)					
ncipal Place of Bu % DEL G. POTTE 308 EAST FIFTH MOUNT DORA FL	ER Avenuje	Mailing Address \$ DEL G. POT 308 EAST FIFT NOUNT DORA	H AVENUE		3. Date Incorporated or Qualified 11/22/1988	3a. Date	e of Last Re 04/24/19	port
Principal Place of	f Business	2a. Mailing Address	s		4. FEI Number	<u> </u>	A	pplied For
0 ha Aat k ata		26 Suite, Apt. #, e			59-2919988			lot Applicable Additional
Suite. Apt. #, etc.	···	27			5. Certificate of Status Desired		Fee F	lequired
City & State		City & State			<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>			May Be to Fees
Zip	Country	Zφ	Country	y Y	8. This corporation has liability for Florida Statutes	intangible ta s 🗌 No	ax under s	199.032
9.	25 Name and Address of Curre	29 nt Registered Agent	30	· · · · · · · · · · · · · · · · ·	10. Name and Address of New 1		Agent	
			61	Name				
POTTER, D	FLG.		82	Street Addr	ress (P.O. Box Number is Not Accepta	ble)		
308 EAST F	FIFTH AVENUE DRA FL 32757		83					
308 EAST F MOUNT DO	FIFTH AVENUE DRA FL 32757	rida. Such change was au	84 Statutes, the above ithorized by the corp	l City	ration submits this statement for the pu rd of directors. I hereby accept the ap	FL urpose of cha pointment as	anong its r	Code egistered offi agent. I am
308 EAST F MOUNT DO Pursuant to the or registered ag familiar with, an NATURE Sugrat	FIFTH AVENUE DRA FL 32757 pert, or both, in the State of Fior id accept the obligations of, Sec ac. bpet or presonant of Portheology OFFICERS AN	rida, Such change was au stein 607.0505, Florida St scalefitter and etc. ND D:RECTORS	B4 Statutes, the above ithorized by the con- tatutes (RETE Frightmet Age 13.	City named corpor poration's boar	ra of directors, thereby accept the app	DATE FICERS AND	anging its registered	egistered offi agent. I am RS IN 12
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