Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90132 028 \*\*\*150.00

## 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

## DOCUMENT #

1. Corporation Name

9 ID INDICENTALINE COMBANIV

BRYCE. MILTON

NAME

Principal Place of Business	Mailing Address					
3148 AUTUMN DR.	3148 AUTUMN DR.					
3148 AUTUMN DRIVE	3148 AUTUMN DRIVE		•	1		
PALM HARBOR FL 34683	PALM HARBOR FL 34683	PALM HARBOR FL 34683		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed 12/29/1988		
2. Principal Place of Business ·	2a. Mailing Address			4. FEI Number		Applied For
3310 U.S. Alternate J	19 <mark>26</mark> 3310 U.S. Al	tern	ate 19	59-2935410		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		, · · ·	5. Certifcate of Status Desired		3.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing	, \$!	<b>5.00</b> May Be
Dunedin, FL	28 Dunedin, FL			Trust Fund Contribution	<u> </u>	Added to Fees
Zip Country	Zip	Country		8. This corporation owes the current	year Intangibl	
24 34698 25 USA	29 34698 30	USA		Personal Property Tax.	Y	
9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regi	stered Agent	t
		81	Name			
BRYCE, MILTON		82	Street Addres	ss (P.O. Box Number is Not Acceptable)	)	
3148 AUTUMN DRIVE		[ ]				
PALM HARBOR FL 34683		83				
		84	City		FL 85	
Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the state agent. I am farmiar with, and accept the obliging the control of the c	02 and 607.1508, Florida Statutes, of Florida. Such change was auth ations of, Section 607.0505, Florida	the above orized by Statutes	e-named corpor the corporation	ration submits this statement for the pur o's board of directors. I hereby accept the	oose of change e appointmen	ging its registered it as registered
SIGNATURE Signatury, typed or printed game of registered page	otean Y. Bryce and and title if applicable. (NOTE: Re	S S G	cretar		2/99 DATE	
	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
			i i			`hanaa [T] Additi

CTORS IN 12 ☐ Addition □ DELETE TITLE

1.2 NAME

3148 AUTUMN DR. 1.3 STREET ADDRESS STREET ADDRESS PALM HARBOR FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 2.1 TITLE TITLE BRYCE, JEAN Y. 2.2 NAME NAME 3148 AUTUMN DR 2.3 STREET ADDRESS STREET ADDRESS PALM HARBOR FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME ,收款的,扩充效 8.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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** 

CR2E034 (11/98)