## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

PRISTINE ENTERPRISES, INC.

**FILED** Mar 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Addres			988		4 segrann aus driet beiet baber baber blate beier beber bebei bebei bebei	
% WILLIAM J. GALEAZZI 3385 N. OCEAN SHORE BLVD FLOLER BEACH FL 32136		3385 N OCEANSHORE BLVD FLGLER BEACH FL 32136				
		US			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 01/20/1989	
2. Principal Place of Business		2a. Mailing Address			4, FEI Number Applied For	
1		26			<b>65-0090196</b> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & Stat	6		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees	
Zip 4	Country 25	Ζιρ <b>29</b>	30 Co	untry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	rent Registered Agen	t	10. Name and Address of New Registered Agent			
GALEAZZI, WILLIAM J. 3385 N. OCEAN BLVD FLGLER BEACH FL 32138				81 Name		
				82	82 Street Address (P.O. Box Number is Not Acceptable)	
				83	83	
				84	FL   FL   The state of the stat	
office or rec	the provisions of Sections 607.0 gistered agont, or both, in the Sta familiar with, and accopt the obl	ste of Florida. Such ch	ange was authorize	∌d b⊾	ove-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered ites.	
signature <sub>s</sub>	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Register	ed Age	Agent signature required when reinstating)  DATE	
12. OFFICERS AND DIRECTORS			13.	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		

TITLE ■ DELETE 1.1 TITLE Change GALEAZZI, WILLIAM J NAME 1.2 NAME 3385 N OCEAN SHORE BLVD 1.3 STREET ADDRESS STREET ADDRESS FLGLER BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ... DELETE TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY+ST-ZIP DELFTE Change Addition TITLE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 suppliemental 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 attach in address

SIGNATURE:

CITY-ST-ZIP

17MUR. 91-9044456528