PROFIT CORPORATION ANNUAL REPORT 1999

TITLE

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90092 034 ***150.00

☐ Change

Addition

FILED

DOCUMENT # K61053

STIL	LWELL SALES INCORPORATED	•		:				
	•				E ANGELEN BLE REIR VERLERBIEL ORDER SELE ENDE			
<u> </u>								
1	Place of Business	Mailing Address				•	,	
C/O RANDALL H STILLWELL 1554 NO RIDGE LAKE CIR \$ RANDALL H STILLWELL 1554 NORTH RIDGE LAKE CIRCLE								
LONGWOOD FL 32750 LONGWOOD FL 32750					DO NOT WRITE IN THIS	SPACE		
US					3. Date Incorporated or Qualified			٦
	•				01/26/1989			
2. Princi	oal Place of Business	2a. Mailing Address		··	4. FEi Number		Applied For	1
21		26			59-2927064	<u> </u>	Not Applicable	1
Suite.	Apt. #, etc.	Suite, Apt. #, etc.				\$8.7	5 Additional	
[22]		27			= 5.º Certifcate of Status Desired ← -	Fee	Required	_
City &	State	City & State			8. Election Campaign Financing	\$5.0	O May Be	7
23		28			Trust Fund Contribution	Adde	od to Fees	1
Zip	Zip Country Zip		Country		8. This corporation owes the current year intangible			Į
24	25	29 3	0		Personal Property Tax.	Yes	<u>s</u> No	
<u> </u>	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		4
	CTILIMETA DANDALI LI			81 Name				1
STILLWELL, RANDALL H. 1554 NORTH RIDGE LAKE CIRCLE				82 Street Addre	ss (P.Q. Box Number is Not Acceptable)			┪
LONGWOOD FL 32750								J
LONGWOOD PL 32/30			83				1	
}			}	84 City		[85] Zi	p Code	-{
				'	FL	.	•	
11Pursi	uent to the provisions of Sections 607,0502 or registered agent, or both, in the State of	and 607.1508, Florida Statutes f Florida, Such change was auth	, the ab	ove-named corporation	ration submits this statement for the purpose of n's board of directors. I hereby accept the appoint the appoint is a statement of the purpose of the purpo	changing	its registered ==	-
agen	t. I am familiar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statu	tes.	ra sould of directors. I hereby except the appoint	illument as	10gistarea	İ
SIGNATI	IRE							{
12.	Signature, typed or printed name of registered agent OFFICERS AND			Apent eigneture required t				ۇ
TILE	D OFFICERS AND	DELETE	13. 1.1 T/T	-	ADDITIONS/CHANGES TO OFFICERS AN	☐ Chang		ન રે
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6.4 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 appears are supplied to the corporation or the co

61 TITLE

62 NAME

6.3 STREET ADDRESS

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