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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # K64539



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 11, 1999 8:00 am Secretary of State

02-11-1999 90021 030 ***150.00

	AVEL SPOT, INC.					kida dana ida
Principal Place	e of Business	Mailing Address				HOM DIEN IDD
2011 WEST CLEVELAND STREET 2011 WEST CLEVELAND STI						
SUITE B SUITE B					DO NOT WRITE IN THE CRACE	
TAMPA FL 33606 US US US			-		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
•					02/07/1989	•
Principal Place of Business 2a, Mailing Address					plied For	
21 26				O COCTO	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Le Contifosto et Status Desired III	Additional equired
22		City & State			1 60 10	
City & State	e	28			1 **	May Be —— to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Intangible	
24	25		30		Personal Property Tax.	□No
	Name and Address of Curre	nt Registered Agent	- 0	4 L N	10. Name and Address of New Registered Agent	
TATE	FIRALIM CHARLES M		8	1 Name		
TATELBAUM, CHARLES M. 100 N TAMPA ST		82	2 Street Addr	Address (P.O. Box Number is Not Acceptable)		
SUITE 1800		83	3	1 10 kg 1	MI SHEET	
TAMI	PA FL 33602	•			19.45 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Code
			84	1 -	FL Tr	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the above	ve-named corp	oration submits this statement for the purpose of changing its on's board of directors. I hereby accept the appointment as re	registered
agent. I a	on familiar with pane accept the obligation	ations of, Section 607.0505, Flor	rida Statute	S.	And board of directors. Thereby decept the appointment as is	9.0.0
	- (, , , , , , , , , , , , , , , , , ,					
SIGNATUR	TIMAMINEN	CHARLES M. TATE	ZBAU	/ 1)	1/25/99_	: [
		CHARLES M. TATE ent and title if applicable. (NOTE:	Registered Age	ent signature require	d when reinstating) 2.37 DATE	
SIGNATURE 12:		CHARLES M. TATE	ZBAU	ent signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
12:	OFFICERS AI	CHARLES M. TATE ent and trie if applicable. (NOTE: ND DIRECTORS	Registered Age	ent signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	DRS IN 12
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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 enamed, or on an attachment with an address, with all other like impowered.

6.4 CITY-ST-ZIP

SIGNATURE: