Apr 29, 1999 8:00 am Secretary of State

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

•	999 DIVISION OF CORPORATIONS					04-29-1999 90163 017 ***150.00					
1. Corporation	MENT # KS								18148 2181 81	ēre Billik ālāli ālbi	) <b>010</b> 11 <b>0</b> 1021 1001
Principal Place 16199 BOYETTE RIVERVIEW FL	ROAD	7421	Mailing Address 7421 ALAFIR RIDGE RD RIVERVIEW FL 33569 US				3.	DO NOT WE	NTE IN T		
								06/19/1989			
— `	ace of Business		Mailing Address				4.	FEI Number <b>59-2956820</b>			applied For lot Applicable
Suite, Apt. i	#. etc.	26	Suite, Apt. #, etc.	_							Additional
22		27					5.	Certificate of Status Desired		Fee R	Required
City & State	9	<u> </u>	City & State	-			6.	Election Campaign Financing Trust Fund Contribution		•	May Be to Fees
23   Zip	Countr	v - 28		Cour	ntry		R	This corporation owes the cu	rrent vea		101668
24	25	29					6.	Personal Property Tax.		Yes	ØNo
		ss of Current Registe	red Agent				10.	Name and Address of New	Register	ed Agent	
£) A fOL	CED DONALD I				81	Name					,
F'ARKER, RONALD L. 16199 BOYETTE ROAD 82 Street Addre							ldress (P	O. Box Number is Not Accept	table)	_	
FIVERVIEW FL 33569											
7.072				. [	53						
				ſ	84	City			F	SE Zip	Code
11 Pursuant 1	to the provisions of Sec	tions 607.0502 and 60	7.1508, Florida Statu	tes, the at	ove-	named co	rporation	submits this statement for th	0.00000	of changing if	ts registered
office or re	egistered agent, or both in familiar with, and acc	in the State of Florida	: Such change was a	authorized	DV II	he corpo a	ition's bo	pard of directors. I hereby acc	ept the ap	pointment as r	egistered
SIGNATURE	Transaction and trans										
	Signature, typed or printed r ame			E. Registered	Agent :	signature re pu		einstating) ADDIT ONS/CHANGES TO C	DATE		C/RS IN 12
TITLE	<u> </u>	FFICERS AND DIREC	DELETE	13. 1.1 TIT	1 F			ADDIT ONS/OFFANGES TO C	1 7 IOLIKE	☐ Change	
NAME	SOLOMON, PAUL			1 2 NA		İ					
STREET ADDFESS	7421 ALAFIA RIDG	E				AODRESS					ì
CITY-ST-ZIP	RIVERVIEW FL			1.4 CIT							
TITLE	V		☐ DELETE	2.1 TIT	LE					Change	e ☐ Addition
NAME.	PARKER, RONALD	LEE		2.2 NA	ME						
STREET ADDRESS	16199 BOYETTE R	OAD		2.3 ST	REET #	ADDRESS					
_CITY-ST-ZIP-	_RIVERVIEW_FL	<u> </u>		2. 4 Cr	TY-ST	-2iP					_==
TITLE			☐ DELETE	3.1 TIT	Œ					☐ Change	e 🔲 Addition
NAME				3.2 NA							Į
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP			☐ DELETE	3.4. Cf		-21P				Change	e
TITLE				4.1 TIT							
NAME				4.2 NA		ADDRESS					ļ
STREET ADDRESS				4.4 CIT							
CITY-ST-ZIP TITLE			☐ DELETE	5.1 TIT		-				☐ Change	e ☐ Addition
NAME				5.2 NA	ме						
STREET ADDRESS				5.3 ST	REET A	ADDRESS					
CITY-ST-ZIP				5.4 CIT	ry-st-	ZIP					
TITLE			☐ DELETE	6.1 TIT	LE					Change	e ☐ Addition
NAME				6.2 NA	ME						
STREET ADDRESS				6.3 ST	REET	ADDRESS					Ì

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 signa ure 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 attact impint with an address, with all other like empowered.

6.4 CITY-ST-ZIP

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