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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L35622**

ACTIVE BUILDING CORP.

HOTIVE DOILDING COM

- 1999

FILED Feb 04, 1999 8:00am Secretary of State

02-04-1999 90005 020 ***150.00



Principal Place	e of Business	Mailing Address			1			
7709 CITRUS H	III IN	7709 CITRUS HILL LN						
NAPLES FL 341		NAPLES FL 34109						
US	•	US			DO NOT WRITE IN	THIS SPACE		_
					3. Date Incorporated or Qualifed			
		••			12/12/1989			
		0- Mailing Address			4. FEI Number		Applied For	┪
2. Principal Pi	lace of Business	2a. Mailing Address				⊢	· · · · · · · · · · · · · · · · · · ·	ન ૅું!
21		26			59-2994349		lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	¥	Additional	1.
22		27			5. Certificate of Status Desired	, Fee F	Required	_
Çity & State		City & State			6. Election Campaign Financing	\$5.0	May Be	1
— ·	6	— ·			Trust Fund Contribution	•	to Fees	
23		28					10100	4
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year.		re/L.	1
24	25	29	30		Personal Property Tax.	Yes	IXNo	-
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Regis	tered Agent		_
	120004	*****		81 Name				
LUR	A A HARTLINE		L					4
				82 Street Add	dress (P.O. Box Number is Not Acceptable)			
	CITRUS LANE		Į			<u> </u>	. 4.31. (1.23.124)	4
NAP	LES FL 34109			83				
					1.35 (4) 315 (37, 340) 1/(5) 14,3 (4)	(400) 分别, 計劃(40	*141 \$12'115 <u>\$1</u>	4
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				L		1 les	to registered	┥
والمراجع والمحاور	to the provisions of Sections 607 050	02 and 607.1508, Florida Stat	utes, the at	pove-named cor	poration submits this statement for the purplical's board of directors. I hereby accept the	ose or changing i	registered	
11. Pursuant	to the provisions of Sections our took				itori a board of directors. I ficient accept the	appointment		
Affice or r	existered agent or both in the State	of Florida, Such change was	autnorized	by the corporat				
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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: Luba Hart MATUR & FOR ITS ON Theme

1/16/99 (941) 514 3334