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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L48455

1. Corporation Name

ECONOMIZER, INC.

FILED Jan 26, 1999 8:00am Secretary of State

01-26-1999 90046 040 ***150.00



rincipal Place							
TOO ME VINC	of Business	Mailing Address					
4720 M.L. KING SR. BLVD. 2617 THONOTOSASSA ROAD		14720 M.L. KING SR. BLVD. 12617 THONOTOSASSA ROAD		DO.NOT.WRITE.IN.THIS SPACE			
OVER FL 33527		-DOVER-FL= 33527	سعه بد <u>خس</u> ر		3. Date Incorporated or Qualifed	<u> </u>	: \
S	• • • • • • • • • • • • • • • • • • • •	US			02/02/1990		
		O- Marillan Addross			4. FEI Number	Appl	ied For
. Principal Pla	ice of Business	2a. Mailing Address			59-2996799	Not	Applicable
il		26		_		\$8.75 Ad	
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Req	uired
2		City & State			6. Election Campaign Financing	\$5.00 N	lay Be
City & State	i .	 			Trust Fund Contribution	Added to	Fees
3		28	Coun	trv	8. This corporation owes the current year	ar Intangible	_
_ Zip ´	Country	├ ─1 `	30	•	Personal Property Tax.	L_ Yes L	□No
4	9-Name and Address of Current	Pagistered Agent	1301		10. Name and Address of New Registe	red Agent	
	9. Name and Address of Cultern	Registered Agent		81 Name			İ
HEIO	TAND, DOUGLAS R.		<u> </u>	00 04:14 8:14	Iress (P.O. Box Number is Not Acceptable)		
HEIO HEIO	TUONOTOSASSA ROAD		Į,	82 Street Add	Hess (F.O. DOX Humbel is Not to be passey		2 - 2 - 2 - 2 - 2 - 1 - 1 - 1 - 1 - 1 -
THONOTOSASSA ROAD THONOTOSASSA FL 33592			}	83			
ITUI	MOTOSKOOK I E GOOSE		ļ.			85 Zip C	ode
			l l	84 City	poration submits this statement for the purpo tion's board of directors. I hereby accept the	FL T	
Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, typed or printed name of registered again to the Signature, the Signature of the Signature, typed or printed name of registered again to the Signature of the Si			13.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTO	RS IN 12
12.	OFFICERS AN	D DIRECTORS		 T	Apprilonois and a	☐ Change	Addition
TITLE	D	☐ DELETE	1.1 TIT	''E'			
			4.0 844	1145	•		
NAME	HEISTAND, DOUGLAS R.		1.2 NA				
NAME STREET ADDRESS	12617 THONOTOSASSA ROAD)	1.3 ST	REET ADDRESS		· .	
	HEISTAND, DOUGLAS R. 12617 THONOTOSASSA ROAL THONOTOSASSA FL	·	1.3 ST 1.4 CF	TY-ST-ZIP_		Change	☐ Addition
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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 of 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, of an an attachment with maddress, with all other like empowered.

SIGNATURE

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16/99

813-659-2902 Daytime Phone #