FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90038 016 ***150.00

DOCUMENT # **L82474**

1. Corporation Name

Principal Place		M	ailing Address	DEACEN			-				
C/O ELIZABETH ANN ANDREASEN C/O ELIZABETH ANN ANDRE 3376 LANDING COURT 3376 LANDING COURT				UNEADEN	AULIT						
PALM HARBOR FL 34684 PALM HARBOR FL 34684							DO NOT WRITE IN THIS SPACE				
							3.	Date Incorporated or Qualifed 06/20/1990			
2. Principal Pi	ace of Business	2a.	. Mailing Address				4.	, FEI Number			Applied For
21		26						<u>59-3019109</u>			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.	. Certifcate of Status Desired			5 Additional Required
22			27						-		 ,
City & State	e	-	City & State				6.	i. Election Campaign Financing Trust Fund Contribution			May Be
23 Zip	Country	28	Zip	Col	untry		-	. This corporation owes the curr	ent vear Inta		10 1 003
24	25	29	2.10	30	2010.		°	Personal Property Tax.		Yes	□No
241	9. Name and Address of Currer		stered Agent	130	Π		10	. Name and Address of New F	·		
			· · ·		81	Name	•				
andreasen, Elizabeth ann			·			Street Add	roce /	D.O. Boy Number is Not Accents	hle)		
3376 LANDING COURT						Street Add	Address (P.O. Box Number is Not Acceptable)				
PALI	I HARBOR FL 34684		•		83						
					84	City	-			85 Zi	p Code
					<u> </u>	L			FL	1 1	ite registered
office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	da. Such change was	authorize	d by	the corporati	ion's b	poard of directors. I hereby accep	t the appoin	tment as	registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title	if applicable. (NOT	E: Registere	d Ager	nt signature require	ed when	reinstating)	DATE		<u> </u>
12.	OFFICERS AN			13.				ADDITIONS/CHANGES TO OF	FICERS AN	D DIREC	TORS IN 12
πι€	D		☐ DELETE	1.1 T	ITLE					☐ Chang	je 🔲 Addition
NAME	Andreasen, Elizabeth A.			1.2 N	AME						
STREET ADDRESS	3376 LANDING CT.			1.3 8	TREE	TADDRESS					
CITY-ST-ZIP	PALM HARBOR FL			1.4 0	ITY-S	ST-ZIP					
TITLE	D		☐ DELETE	2.1 7	ITLE					Chang	je 🔲 Addition
NAME	ANDREASEN, JOHN HOWARD			2.2 N	AME						
STREET ADDRESS	3376 LANDING CT.			2.3 9	TREE	TADORESS					
CITY-ST-ZIP	PALM HARBOR FL					ST-ZIP				П.С.	-
TITLE			☐ DELETÉ	3.1 7						☐ Chang	je
NAME				3.2 N							
STREET ADDRESS						TADORESS					
CITY-ST-ZIP	l/nature -		□ pereze			ST-ZIP				Chang	je 🗌 Addition
TITLE			☐ DELETE	4.1 7							le Vooimon
NAME					VAME						ļ
STREET ADDRESS	'					TADDRESS					1
CITY-ST-ZIP			☐ DELETE	_		ST-ZIP				Chang	e Addition
TITLE			□ nereie	5.1 T 5.2 N							,- L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NAME			•	1 .		TADDRESS					}
STREET ADDRESS						ST-ZIP		•			
CITY-ST-ZIP TITLE			☐ DELETÉ	6.1 T		·· - '				☐ Chang	je 🔲 Addition
NAME				6.2 N	AME						
STREET ADDRESS				6.3 S	TREE	TADDRESS					

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 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, or or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE