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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 25, 1999 8:00am

**Secretary of State** 

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCU	MENT # M20459	<b>{</b> 			01-25-1999 90008 003 *	***150.00	
1. Corporatio	in Name						
JERRY L	_ Underwood, inc.	*. <del>t</del>					
	•				1 ( <b>41) 1</b> (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41) 1 (41)	HERI BUBIL BUBIL BUBIL B	
		į 1					
Principal Plac	e of Business	Mailing Address				(817 B)B() B)B() B(B) 3	14011 61011 1001
1850 OLD DIXIE HWY		1850 OLD DIXIE HWY					
HOMESTEAD F	L 33033	HOMESTEAD FL 33033			DO NOT WRITE IN T	THE SDACE	
	a a	·			3. Date Incorporated or Qualifed	HIS SPACE	
					09/11/1985		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Api	plied For
<b>⊢</b> , '		26			59-2575750	<u> </u>	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 A	Additional
22		27			5. Certifcate of Status Desired	Fee Re	quired
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Count	'y	8. This corporation owes the current year		
24	25		30		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New Registe	red Agent	
I INID	ERWOOD, JERRY L.	•	ا	I IVAIIIC			
	OLD DIXIE HWY	r i	8:	2 Street	Address (P.O. Box Number is Not Acceptable)		
	MESTEAD FL 33033	•	8:	3		134.	3112-1 34
,		İ					
			8	4 City		85 Zip C	Code
		<u> </u>					
44 " Durement	to the provisions of Sections 607 0502	and 607 1508: Florida Statute	es the aho	ve-named	l cornoration submits this statement for the numos	e of changing its	registered
11 Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508; Florida Statute f Florida. Such change was au	es, the about thorized b	ve-named y the corp	l corporation submits this statement for the purpos loration's board of directors. I hereby accept the a	e of changing its ppointment as rec	registered gistered
	to the provisions of Sections 607.0502 registered agent, or both, in the State of familiar with, and accept the obligations.	and 607.1508; Florida Statute f Florida. Such change was au ons of, Section 607.0505, Flor	es, the about horized burida Statute	ve-named y the corp is.	corporation submits this statement for the purpos oration's board of directors. I hereby accept the a	e of changing its oppointment as rec	registered gistered
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 registered agent, or both, in the State o am familiar with, and accept the obligati displayments of registered agent Signature, typed or printed name of registered agent				corporation submits this statement for the purpos ioration's board of directors. I hereby accept the al		registered gistered
	•	and title if applicable. (NOTE:					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Ag	ent signature	required when reinstating) • DATE		
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L.	and title if applicable. (NOTE:  D DIRECTORS	Registered Ag	ent signature	required when reinstating) • DATE	E AND DIRECTO	RS IN 12
SIGNATURE  12. TITLE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE:  D DIRECTORS	13. 1.1 TITLE	ent signature	required when reinstating) • DATE	E AND DIRECTO	RS IN 12
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L.	and title if applicable. (NOTE:  D DIRECTORS	13. 1.1 TITLE	ent signature	required when reinstating) • DATE	S AND DIRECTOR Change	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L. 1850 OLD DIXIE HWY	and title if applicable. (NOTE:  D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE	ent signature	required when reinstating) • DATE	E AND DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L. 1850 OLD DIXIE HWY	and title if applicable. (NOTE:  DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY-	ent signature	required when reinstating) • DATE	S AND DIRECTOR Change	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L. 1850 OLD DIXIE HWY	and title if applicable. (NOTE:  DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTOR Change	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L. 1850 OLD DIXIE HWY	and title if applicable. (NOTE) DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY-	ent signature  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	E AND DIRECTO	RS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L. 1850 OLD DIXIE HWY	and title if applicable. (NOTE:  DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE	ent signature  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTOR Change	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP UNDERWOOD, JERRY L. 1850 OLD DIXIE HWY	and title if applicable. (NOTE) DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME	ent signature  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	E AND DIRECTO	RS IN 12 Addition
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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 changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS