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

DOCUMENT # M64445 1. Corporation Name

VERTICALS UNLIMITED, INC.

Principal Pla	ce of Bus
3306 MAGGIE	BLVD.
ORI ANDO FI	32811

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90115 035 ***150.00



Principal Place of Business Mailing Address 3306 MAGGIE BLVD. 3306 MAGGIE BLVD. ORLANDO FL 32811 DO NOT WRITE IN THIS SPACE 3, Date Incorporated or Qualifed 01/12/1988							
ORLANDO FL 32811 ORLANDO FL 32811 ORLANDO FL 32811 ORLANDO FL 32811 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/12/1988 4. FEI Number	Principal Place of Business	Mailing Address					
3. Date Incorporated or Qualifed 01/12/1988 2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. A FEI Number Sp-2878990 5. Certificate of Status Desired Fee Required				DO NOT WRITE IN THIS SPACE			
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip Country Zip Country Signame and Address of Current Registered Agent BARNES, LAURENCE J. 3306 MAGGIE BLVD. ORLANDO FL 32811 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Suite, Apt. #, etc. Signates of Status Desired \$8.75 Additional Fea Required \$8.75 Additional Fea Required \$5.00 May Be Added to Fees Added to Fees Added to Fees And Country 8. This corporation owes the current year Intangible Personal Property Tax. Yes \sum No 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE				3. Date Incorporated or Qualifed			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27	2. Principal Place of Business	F .		1			
City & State Country Registered Agent Since Added to Fees Registered Agent Since Address of Current Registered Agent Since Address of New Registered Agent Since Address of New Registered Agent Since Address (P.O. Box Number is Not Acceptable) Since Address (P.O. Box Number is Not Acceptable) Since Address (P.O. Box Number is Not Acceptable) Since Address of Current Registered Agent Since Address (P.O. Box Number is Not Acceptable) Since	Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$8.75 Additional			
Personal Property Tax. Yes No 9. Name and Address of Current Registered Agent BARNES, LAURENCE J. 3306 MAGGIE BLVD. ORLANDO FL 32811 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Viry FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	City & State	City & State					
9, Name and Address of Current Registered Agent BARNES, LAURENCE J. 3306 MAGGIE BLVD. ORLANDO FL 32811 82 Street Address (P.O. Box Number is Not Acceptable) 83	¬ ¯ *	⊢ <u> </u>	untry				
BARNES, LAURENCE J. 3306 MAGGIE BLVD. ORLANDO FL 32811 82 Street Address (P.O. Box Number is Not Acceptable) 83		nt Registered Agent	· 10. Name and Address of New Registered Agent				
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SIGNATURE (AUCTE: Registrated Appl signature required when reinstation).	office or registered agent, or both, in the State	of Florida. Such change was authorize	a by the coi	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered			
	SIGNATURE	AIOTE P.	d Agost signatu	DATE			

agent. I a	I lamilar with, and docept the obligations	. D., COURT OUT 14 200, 1 10.10				
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable (NOTF: F	Registerød Agent signature requin	ed when reinstating} DATE		
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICER			
TITLE	PD	☐ DELETE	1.1 TITLE		Change	Addition
NAME	BARNES, LAURENCE J.		1.2 NAME			
STREET ADDRESS	3306 MAGGIE BOULEVARD		1.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP			
TITLE	STD	☐ DELETE	2.1 TITLE		Change	Addition
NAME	BARNES, CAROL LYNN		2.2 NAME			
STREET ADDRESS	3306 MAGGIE BOULEVARD		2.3 STREET ADDRESS			,
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY-ST-ZIP	·		•
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME :			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME			52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP		•	

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.