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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300006629

S.G.G. INC.

FILED Mar 24, 1999 8:00 am Secretary of State

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Principal Place	e of Business	Mailing Addr	ress					1 1981		.,,,,					:
2770 S. O. BLO			2770 S. O. BLOSSOM TRAIL												
Orlando FL 3: US	2805	UKLANDO FL US	ORLANDO FL 32805					DO NOT WRITE IN THIS SPACE							
00		•					3.	. Date Inco	rporated or	Qualifed					
:								01/20/1	993						l
2. Principal Pl	ace of Business	2a. Mailing A	Address	-		•	4.	. FEI Numb	er				Appli	ed For	
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Suite, Apt.	#, etc.	Suite, Ap	ot. #, etc.	·			5	. Certifcate	of Status I	Desired				ditional	
22		27		· · · · · · · · · · · · · · · · · · ·			3.	. Certificate					Requ		
City & State	8	City & St	City & State					. Election C	ampaign F	inancing		\$5.0			
23		28						Trust Fun	d Contribut	ion		Adde	ed to	Fees	1
Zip	Country	Zip		Cour	ntry		. 8	. This corp			ent year li		_	Tar.	
24	25	29		30					Property Ta			□Yes		No	ł
	9. Name and Address of Curre	ent Registered Age	ent .		94		10). Name an	d Address	of New F	Registered	d Agent			
DAD!	CO CARROLL S				81	Name									j
	CO, CARROLL S			Ī	82	Street A	Address (I	P.O. Box N	umber is N	ot Accepta	able)				l
,	S ORANGE BLOSSOM TRAIL								<u> </u>	-					ļ
	E 194				83										ļ
UHU	ANDO FL 32809			F	84	City						, 85 Z	ip Co	de	1
}											<u> </u>	<u> </u>		-:	
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the State	502 and 607.1508, F	Florida Statut	es, the ab	ove-	namad a	corporatio	on submits t	his stateme	ent for the ebv accer	purpose o	ot changing pintment as	its re regis	gisterea itered	
office or re				uthorized	by th	he corpo	าเสนอกรถ								
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	gations of, Section 6	mange was a 507.0505, Flo	utnorized	Dy tr	he corpo	oration's b	oaid of dire	OLD TO THE	,	or and appr		•		
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CITY-ST-ZIP 14. 1 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, without other like empowered.

SIGNATURE: