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

Mailing Address 12694 ULMERTON RD.

SUITE A

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000029975

Principal Place of Business

12694 ULMERTON RD.

STREET ADDRESS CITY-ST-ZIP

SUITE A

LOST IN THE 50'S, INC.

LARGO FL 33774			LARGO FL 33774					DO NOT WRITE IN THIS SPACE					
US			US					3. Date Incorporated or Qualifed					
								04/23/1993					
2. Principal Place of Business			2a. Mailing Address					FEI Number			App	lied For	
21	· •	26	-					59-3183161			Not	Applicable	
Suite, Apt.	# etc		Suite, Apt. #, etc.							\$8.	75 A	ditional	
22			27				5.	Certificate of Status Desired		F	ee Req	uired	
City & State			City & State					Election Campaign Financing		\$5	י חח	May Be	
23			28				1	Trust Fund Contribution			ided to		
	Zip Country Zip			Country					rant waar Inte				
	r -		· —	_	.,		8. This corporation owes the current year Intangible Personal Property Tax.					×No	
24 25 29 30													
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							_	
DIAMOND, ROBERT F					or Name								
2280 10TH ST. S.E.				82 Stre			ess (P	O. Box Number is Not Accept	able)				
LARGO FL 33771													
				L		0.11				85	Zip C		
	•			*	34	City			FL	83	Zip C	006	
A District COT 0500 and 507 4500 Floride Statutes the above comed corporation pulmits this statement for the number of changing its registered													
l office or re	egistered agent, or both, in the State o	of Florid	da. Such change was aut⊓	iorizea c	οy τ	tne corporatio	n's bo	pard of directors. I hereby acce	pt the appoir	ntment	as reg	istered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE									DATE				
	Signature, typed or printed name of registered agen				gent	t signature required		ADDITIONS/CHANGES TO OF		ם חום	ECTO	2C IN 12	
12.	OFFICERS AN	DUIKE	DELETE	13.	_			ADDITIONS/CHANGES TO UP	FICENS AN			Addition	
TITLE	D					[•		() Oi	ungo	□ / 	
NAME	DIAMOND, ROBERT F			1.2 NAM	E	1							
STREET ADDRESS	13379 - 84TH TERR. NO. 13			1.3 STREET ADDRESS									
CITY-ST-ZIP	SEMINOLE FL 33776			1.4 CITY	-ST	r-zip							
TITLE	D		☐ DELETE	2.1 TITLE	E	ŀ				Ch	ange	☐ Addition	
NAME	DIAMOND, FRANCES M			2.2 NAM	E				e				
STREET ADDRESS	13379 - 84TH TERR. NO.			2.3 STRE	EET.	ADDRESS			•				
ļ	SEMINOLE FL 33776		14.5	2.4 CITY					magnification of the second	-		[
CITY-ST-ZIP	D		☐ DELETE	3.1 TITLS		1-Zir				☐ Ch	ange	Addition	
									٦		•	_	
NAME	DIAMOND, DANIELLE N			3.2 NAM									
STREET ADDRESS	13379 - 84TH TERR. NO.					ADDRESS							
CITY-ST-ZIP	SEMINOLE FL 33776			3.4. CITY		T-ZIP						- Addition	
TITLE			☐ DELETE	4.1 TITL	E					[] C	ange	☐ Addition	
NAME				4. 2 NA	ИĔ								
STREET ADDRESS				4.3 STRI	EET	ADDRESS							
CITY-ST-ZIP	•			4.4 CITY	-ST	r-ZIP							
TITLE			☐ DELETE	5.1 TITU						Cr	ange	Addition	
NAME				5.2 NAM	ΙE								
				5.3 STRI	EET	ADDRESS							
STREET ADDRESS	•			5.4 CITY								:	
CITY-ST-ZiP			☐ DELETE	6.1 TITU						□Ch	ange	Addition	
TITLE			C) Deterio	6.2 NAM								١٠٠٠ السنو	
NAME	oran error i												
STREET ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			6.3 STR	EET	[ADDRESS							

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the examption 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 it changed, or on an attachment with an address with all other like empowered. **SIGNATURE:**

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90248 044 ***150.00