## 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

## Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90037 003 \*\*\*150.00

DOCUMENT # P9300032765  1. Corporation Name ICHI PROPERTY MANAGEMENT, INC.					
Principal Place	of Business	Mailing Address			
13220 HOUSTON AVE. 13220 HOUSTON AVE.					
HUDSON FL 34667 HUDSON FL 3		HUDSON FL 34667		DO NOT WRITE IN THE	SSPACE
US		US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed	
				05/05/1993	1
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3188053	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country		Country	8. This corporation owes the current year li	
24	25	29	30	Personal Property Tax.	☐ Yes ☐ No
<u> </u>	9. Name and Address of Curre			10. Name and Address of New Registered	l Agent
HOOVER, DAVID W  13220 HOUSTON AVE  HUDSON FL 34867  82 Street Address (P.O. Box Number is Not Acceptable)  13270 - 88 HOUSTON AVE  83  84 City Hupson FL 85 Zip Code 3 44667					
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 Hibrida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and applies with and accept the obligations of Section 807.0505. Florida Statutes.					
SIGNATURE	Levias	Honderson	<b>-</b>		2-99
	Signature, typed or printed name of registered ag		Registered Agent signature require	ad when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	NO DIDECTORS IN 12
12.	P OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE NAME	KIRK, ANN		1.2 NAME		
STREET ADDRESS	13220-182 HOUSTON AVE		1.3 STREET ADDRESS		Ì
CITY-ST-ZIP	HUDSON FL 34667		1.4 CiTY-ST-ZIP		
TITLE	110000111201001	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS		•	2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	•	- Change Addition
NAME			3.2 NAME		ļ
STREET ADDRESS			3.3 STREET ADDRESS		Ì
CITY-ST-ZIP			34. 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	}		5.2 NAME		;

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

□ DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Change

☐ Addition