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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300040762

1. Corporation Name

PARK TO FLY, INC.

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Principal Place of Business		Mailing Address								
7855 N FRONTAGE RD		7855 N FRONTAGE RD			ļ					
(FRONTAGE & SR 436)		(FRONTAGE & SR 436)			DO NOT WRITE IN THIS SPACE					
ORLANDO FL 3 US	2812	ORLANDO FL 32812 US				3. Date Incorpo				
03		00				06/09/199				
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			T A	Applied For
⊢ '	lace of positions	26				59-31880	46			lot Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.							\$8.75	Additional
22		27			5. Certificate of	Status Desired		Fee F	Required	
City & State		City & State				6. Election Cam	npaign Financing	9 -	\$5.00	May Be
23		28				Trust Fund C	ontribution	" []	Added	to Fees
Zip	Country	Zip	Country	/	·	8. This corporal	tion owes the cu	ırrent year İr	ntangible	
24	25	29	30			Personal Pro	<u> </u>		Yes	□ No
	9. Name and Address of Curr	rent Registered Agent				10. Name and A	Address of New	Registered	Agent	
			81	Nan	1e					
	D, BUDDY D ESQ.		82	Stre	et Addre:	ss (P.O. Box Num	ber is Not Accep	otable)		
!	N. MACDILL AVE.									
) TAM	PA FL 33609		83	•						
			84	City					85 Zig	Code
			{ ``	, Oity				<u>FI</u>	∟	
				1						
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statute	s, the abov	/e-nam	ed corpo	ration submits this	statement for th	ne purpose o	of changing i	ts registered registered
defice or r	agistered agent or both in the Sta	ite of Florida. Such change was au	itnorizea by	me co	ed corpor erporation	ration submits this n's board of directo	statement for th ors, I hereby acc	ept the appo	of changing i pintment as i	ts registered registered
office or r agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Stam familiar with, and accept the obl	ite of Florida. Such change was au	itnorizea by	me co	ed corpor erporation	ration submits this n's board of directo	statement for th	e purpose of the appo	of changing i	ts registered registered
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SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

6.4 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 part attachment with an address, with all other like empowered.

407-851-8875