## 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

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

04-23-1999 90044 004 \*\*\*150.00

## DOCUMENT # **P93000041523**1. Corporation Name

PETMAR INVESTMENTS, INC.

Principal Place of Business	Mailing Address			
5770 W. IRLO BRONSON MEMORIAL HIGHWAY SUITE 413 KISSIMMEE FL 34746	5770 W. IRLO BRONSON MEMORIAL HIGHWA SUITE 413 KISSIMMEE FL 34746			
2. Principal Place of Business	2a. Mailing Address			

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3. Date Incorporated or Qualifed

06/11/1993

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2. Principal Pl	Place of Business 2a. Mailing Address			NIL	4, FEI Number		lied For	
21 <i>2090</i>	OWESSA CT.	7. 26 P.O. Box 6/7504		7	59-3190180	<del></del>	Applicable	
Suite, Apt.					5. Certifcate of Status Desired	<b>\$8.75</b> Ad		
22	27			5. Certificate of Status Desired	Fee Req	uired		
City & State	City & State City & State				6. Election Campaign Financing	\$5.00 A	May Be	i
The much to		1-6	<b>,</b>	-Trust Fund Contribution	Added to			
23 - 7/35 / /// 22   28   Country   Zip   Country   Zip   Country   29   3286/-755   30   29   3286/-755   30   29   3286/-755   30   30   30   30   30   30   30			Count	ry.	8. This corporation owes the current y	ear Intangible		
24 347	46 <sub>25</sub> 125A	29 3286/-750/30	1 /	15A	Personal Property Tax.	Yes	□No	
<u> </u>	9. Name and Address of Current	Registered Agent	<u> </u>		10. Name and Address of New Regis	stered Agent		
	J. Maine Blid Addition of Contains	Trogiotal San		1 Name				
MHĪĞ	GAI, PETER MUIGAI		L					
	OWASSA COURT		٤	2 Street Add	fress (P.O. Box Number is Not Acceptable)			
	IMMEE FL 34746		-					
Noo	MANAGE I C 34140		1	3)				1
	=		5	4 City		85 Zip C	ode	
ب بینید	# ·	<u> </u>				. FL		İ
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abo	ve-named con	poration submits this statement for the purp	ose of changing its r	egistered	i
office or n	egistered agent, or both, in the State of	it Florida. Such change was autho	onzea i	y ine corporat	ion's board of directors. I hereby accept the	appointment as reg	istered	j.
agent, I ar	n familiar with, and accept the obligation	ons or, Section 607.0303, Fibrida	i Olaibi	75.		11 may 1 4 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1		i
SIGNATURE		- WOTE S			ed when reinstating)	DATE	<u> </u>	
	Signature, typed or printed name of registered agent OFFICERS AND		13.	Jent signature requir	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12	CR2E034 (11/98)
12.	PCEO	DELETE	1.1 TITU		ADDITIONO/CHANGEO TO CETTOE	☐ Change	Addition	=
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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, with all other like empowered.

SIGNATURE:

NG OFFICER OR DIRE