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

DOCUMENT # P93000051441

PUMP'N INC.

Principal Place of Business Mailing Address

2133 N.E. 26TH ST. FT. LAUDERDALE FL 33305 2133 N.E. 26TH ST. FT. LAUDERDALE FL 33305

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90005 039 ***150.00



DO NOT WRITE IN THIS SPACE

							3. Date Inc	orporated or C	Qualifed				
- n	(A Mailine	Address				4. FEI Nun				1 1	pplied For	
-	face of Business	2a. Mailing	Aduress									ot Applicat	
21	<u> </u>	26 Suite /	Npt. #, etc.				65-042	20390			حللب	Additional	"""
Suite, Apt.	#, etc.	27	cpt. #, etc.				5. Certifcat	e of Status De	sired [equired	
City & State	e	City &	State				6. Election	Campaign Fin	ancing _r	7	\$5.00	May Be	
23		28	_				Trust Fu	nd Contributio	<u>ก</u> _		Added	to Fees	
Zip	Country	Zip		Count	ry		8. This cor	poration owes	the current	year Intang	gible		
24	25	25 29 30					Personal Property Tax.						
	9. Name and Address of Current	Registered Ag	gent				10. Name a	nd Address o	f New Reg	istered Ag	ent		
	-			8	H N	iame							
DERI	usha, jim			-	2 S	troot Addro	ess (P.O. Box	Number is Not	Accentable	2)		-	\dashv
2133	N.E. 26TH ST.			}°	3	lieet Addre	355 (F.O. BOX	Antipes is 1400	Acceptable	-1			- }
FT. L	AUDERDALE FL 33305			8	13								_1
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				J٤	34 C	ity				FL	85 Zip	Code	
	to the provisions of Sections 607.0502		Elecide Statutos	the abo		mad corpo	ration euhmite	this statemen	t for the nu		i	s registered	,
11. Pursuant	to the provisions of Sections 607.0302 egistered agent or both, in the State o m familiar with/and accept the poligati	f Florida, Such	change was auth	norized b	y the	corporation	n's board of di	rectors. I herel	by accept the	ne appointm	nent as r	egistered	´
agent. I a	m familiar with and accept the poligation	ons of Section	607.0505 Florida	a Statute	es.		11 06	, 00					
SIGNATURE	- 1 sed 1	10/0	we men		_		4-28	-//					ĺ
	Signature, typed of entitled name of registered agent-		(NOTE: Re		ent sign	nature required	when reinstating)			DATE		000 111 40	<u>@</u>
12.	OFFICERS AND	DIRECTORS		13.			ADDITIO	NS/CHANGES	TO OFFIC	ERS AND	DIRECT	UKS IN 12	CR2E034 (11/98)
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	I			64 CITY	. ST. 710	,							1

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 supplied ental 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed or

SIGNATURE

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