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Secretary of State

03-01-1999 90164 045 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000055322

1. Corporation Name

Principal Place of Bi	usiness	Mailing Address									
2 DAVID ST.		2 DAVID ST. C									
FT WALTON BEACH FL 32547 FT WALTON BEACH FL 32547			47	1			DO NOT WRITE IN THIS SPACE				
US		US					Date Incorporated or Qualit 08/02/1993	fed			
2. Principal Place o	f Business	Za. Mailing Address				4.	FEI Number	-		Applied For	
21		26					<u>59-3205299</u>			Not Applicable	
Suite, Apt. #, etc).	Suite, Apt. #, etc.		_		5.	Certificate of Status Desired	d 🔲	•	5 Additional Required	
City & State		City & State				6.	Election Campaign Financi	ng 🗀	\$5.	00 May Be	
23		28					Trust Fund Contribution			ed to Fees	
Zip	Country	Zip	Countr	ry		1	This corporation owes the	current year	Intangible Yes	□No	
9.	25 Name and Address of Current		30				Personal Property Tax. Name and Address of Ne	w Registere			
		Negistered Agent	8	1 N	Name		Tighte and Addition of the		, a , igo		
CAMPBEL			8:	2 -	Stan at Andria	/D	O. Box Number is Not Acc	ontable)			
	ST GLEN PLACE		100	2 3	street Addre	ess (P.	.O. Box Number is Not Acci	eptavi o)			
MARY ES	THER FL 32569		8:	13		-					
			8-	14 (City		<u> </u>		85	Zip Code	
office or register	provisions of Sections 607.0502 red agent, or both, in the State o niliar with, and accept the obligati	if Florida. Such change was au	thorized b	y the	corporatio	on's bo	ard of directors. I hereby ac	cept the app	pointment a	s registered	
SIGNATURE Signatu	ure, typed or printed name of registered agent	and title if applicable (NOTE:	Registered Ag		nature required	d when re	einstating)	DATE			
SIGNATURE Signatu	ure, typed or printed name of registered agent		Registered Ag		nature required		oinstating) ADDITIONS/CHANGES TO		AND DIRE	CTORS IN 12	
Signatu 12. TITLE P	OFFICERS AND			gent sig	nature required				AND DIRE		
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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.