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 # P9300056182 1. Corporation Name

MARTINSON ENTERPRISES, INC.

FILED Feb 17, 1999 8:00 am Secretary of State

02-17-1999 90067 012 ***150.00



		• •							
Principal Place	e of Business	Mailing Address				(19(123) (10 12:01 (iii) 01(i) 00(ii) 01(i) 00(ii) 0 & 0	Of string reas roat	
1880 TYLER AV MELBOURNE F		1880 TYLER AVE MELBOURNE FL 32935				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		****	7
						08/09/1993			4
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	——	pplied For	1:
21		26				59-3198820		lot Applicable	-
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	•	Additional Required] .
City & Stat	e	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Сог	intry		8. This corporation owes the current year In			
24	25		30		400	Personal Property Tax.	☐ Yes	□No	4
	9. Name and Address of Current	Registered Agent		ļ.,		10. Name and Address of New Registered	1 Agent		4
		•		81	Name				
	itinson, Christopher S) Tyler ave			82	Street Addre	ress (P.O. Box Number is Not Acceptable)			1
MELBOURNE FL 32935		•		83		24 () () () () () () () () () (
				84	City	Fi	85 Zip	Code ']
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent	f Florida. Such change was au ons of, Section 607.0505, Flori	ithorizeo ida Stat	by to the state of	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appointment of the purpose of the	entment as r	egistered	=
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	- 60 - 60 - 60 - 60 - 60 - 60 - 60 - 60
TITLE	Р	☐ DELETE	1.1 TI	TLE			Change	Addition	ΙΞ
NAME	MARTINSON, CHRISTOPHER S		1.2 NA			•			2
STREET ADDRESS	1880 TYLER AVE	1.3 ST		3 STREET ADDRESS					F034
CITY-ST-ZIP	MELBOURNE FL 32935	1.4 CF		CITY-ST-ZIP					_ გ
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NAME	MARTINSON, CHRISTOPHER S		2.2 N	AME					
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CITY-ST-ZIP	MELBOURNE FL 32935		. 3.4. C	ITY-S	T-ZIP	44	·	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4
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STREET ADDRESS					ADDRESS			•	-
CITY-ST-ZIP	•	□ pciete	6.1 Ti	TY-ST	-217	·	☐ Change	Addition	┨.
TITLE		☐ DELETE	6.2 N				L Change		
NAME					ADDRESS				
STREET ADDRESS	1		0.35	IKEE)	ADDRESS				1

6.4 CITY-ST-ZIP 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 or an attachment with an address, with all other like empowered.

SIGNATURE: 1/2

CHRISTOPHERS. MARTINSON