PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90011 043 ***150.00

DOCUMENT # P93000059966						
1. Corporation Name						
THORWEB SERVICES, INC.					A MARINARA INA KAMPANTANI ABANTABANTANINA ARIAH	H
						l
Principal Place of Business Mailing Address						H
3790 1ST AVE. N.W. 3790 1ST AVE N.W.						
NAPLES FL 34120 BOX 164					De Not Moute IN THE COACE	
US NAPLES FL 34120					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	 1
{	•	US			08/26/1993	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	\dashv
└	ace of Busiless	26 3790 1	Me	N.W.		le
21 26 5 70 1 77/2 Suite, Apt. #, etc. Suite, Apt. #, etc.			77.0	<i>y</i>	\$8.75 Additional	\neg
22 27					5. Certificate of Status Desired Fee Required	
City & State City & State			-/	6. Election Campaign Financing \$5.00 May Be		
23		28 //Ap/es	· /-	<u>L. </u>	Trust Fund Contribution Added to Fees	_
Zip	Country	3/1/04	Cour	ntry	8. This corporation owes the current year Intangible	ı
24	25	29 3 6 7 20	30	<u> </u>	Personal Property Tax. Yes No 10. Name and Address of New Registered Agent	_
	9. Name and Address of Current	Registered/Agent		81 Name		
PFUFFR, WILLIAM						
1124 GOODLETTE RD				82 Street	et Address (P.O. Box Number is Not Acceptable)	
NAPLES FL 33940			ļ	83	78.00	_
17/1 ELG 1 E 00010						
				84 City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named of					ad assession submits this statement for the surpose of changing its registered	i
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
	III familia: Willi, and accept the congent	ons or, Cocacin cor	, longer office			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (N	OTE: Registered	Agent signature r	re required when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SP	☐ DELETE			THARRY C POFFINOUS STRONG Addition Addi	
NAME	POFF, HARRY		1.2 NA		HARRY C DUE NIW	
STREET ADDRESS	2338 IMMOKALEE RD BOX 164			REET ADDRESS	\$ 3790 / 20120	
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STREET ADDRESS	1		0.3 51			

14. I nereby 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:

ATTURNED TO THE OF PRINTED THE OFFICER OF DIRECTOR

3/23/99 99

941-352-4563 Daytime Phone # :R2E034 (11/98)