PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000060243**

FILED Feb 23, 1999 8:00 am Secretary of State 02-23-1999 90104 011 ***150.00

WALLCU	VERING UNLIMIT	ED, INC.							KI 1 773 1 (1871)			
Principal Place	e of Business		Ma	ailing Address				- 1 (201/20) (ift ift inn einet daube neben an	III 6 p er a 9 1711 8 1	IN INDIA	ilda iiri sabı	
				ARTHUR J. BURKETT								
% arthur J. Burkett 3101 Michigan avenue				3101 MICHIGAN AVENUE							•	
PENSACOLA FL 32526			PENSACOLA FL 32526					DO NOT WRITE IN THIS SPACE				
								3. Date incorporated or Qualifed 08/20/1993			لسدانية	
2. Principal P	lace of Business		2a.	Mailing Address				4. FEI Number		Арр	lied For	1
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Suite, Apt. #, etc.			-\ 	Suite, Apt. #, etc.				5. Certificate of Status Desired	, \$8	3.75 A	dditional	ľ
22			27	27				5. Certificate of Status Desired	,	Fee Rec	quired]
City & State				City & State				6. Election Campaign Financing	, \$	5.00 h	Vay Be]
23 ====================================			- 28	- مستني	and the same of	=		Trust Fund Contribution	<u>. </u>	Added to	Fees	
Zip	Count	ry .	1	Zip Co				8. This corporation owes the current year Intengible			سنة -	
24	25		29	29 3		30]		Personal Property Tax. X Yes No			□ No	
 -	9. Name and Addr	ess of Curren		stered Agent		T		10. Name and Address of New Regi	stered Agen	<u>t </u>		Į
						81	Name					[
BURI	Kett, arthur j						A	(D. C. Carration and St. Mark Assessable				ł
3101	MICHIGAN AVENUI	E				82	Street Addi	ress (P.O. Box Number is Not Acceptable	,			
PEN	SACOLA FL 32526					83						İ
						1						1
						84	City		FL 85	Zip C	ode	
				4500 Et 13- 01-1				amiles asked to the statement for the pur	none of chan	ino its r	enistered	1
11. Pursuant	to the provisions of Sec	ctions 607.0502	2 and 60 of Florid	07.1508, Florida Statu da. Such change was :	ites, ine a authorized	d by th	-named corp he comoratio	oration submits this statement for the pur	a appointmer	ger as t	istered	l
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agent. I a	m familiar with and acc	<u>cept</u> the obligat	ipons of,	Section 607.0505 FI	orida Stat	tutes.	,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_				
ι	/ / / //		tions of, Lel	reco				on's board of directors. I hereby accept the	1-99			
SIGNATURE	Signature, typed or printed near	ne of registered agen	ecc	JZECJ II applicable. (NOT	E: Registered	d Agent :		d when reinstating)	DATE			<u>8</u>
SIGNATURE	Signature, typed or printed repr	1 95	ecc	# applicable. (NOT	E: Registere,	d Agent :			DATE ERS AND DIE	RECTOF	RS IN 12	11/98)
SIGNATURE	Signature, typed or printed name	o of registered agent	ecc	JZECJ II applicable. (NOT	E: Registered 13.	d Agent :		d when reinstating)	DATE ERS AND DIE			4 (11/98)
SIGNATURE	Signature, typad or printed near D BURKETT, ARTHUI	of registered agent DFFICERS AN	ecc	# applicable. (NOT	E: Registere. 13. 1.1 TI 1.2 N	d Agent : ITLE IAME	signature require	d when reinstating)	DATE ERS AND DIE	RECTOF	RS IN 12	034 (11/98)
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and accurate and that my signature shall have the same regard reflect as it made discert call, that is seried to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in officer or director of the corporation or the receiver or trust Block 12 or Block 13 if changed, or on aprattachment with