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 # P93000081483

1. Corporation Name

PROPROP, INC.

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90053 032 ***150.00



Principal Place of Business 5690 S. BURKETT LANE WINTER PARK FL 32792 2. Principal Place of Business 2. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated or Qualifed 11/29/1993 2. Principal Place of Business 3. Date Incorporated or Qualifed 11/29/1993 2. Principal Place of Business 3. Date Incorporated or Qualifed 11/29/1993 4. FEI Number 59-3214356 Not Applicable 59-3214356 Not Applicable 59-3214356 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State 28 Zip Country Zip Country Suite, Apt. #, etc. 29 Country Suite, Apt. #, etc. 10. Name and Address of New Registered Agent HUSTY, TODD M 15050 N HWY 441 EUSTIS FL 32726
WINTER PARK FL 32792 WINTER PARK FL 32792 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/29/1993 2. Principal Place of Business FDSD N. H.S.Y 26 5500 N. H.S.Y 26 5500 N. H.S.Y 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. City & State 28 Suite, Apt. #, etc. 29 Country Zip Country Zip Country Zip Country 30 Suite, Apt. #, etc. 21 Country Country Zip Country 32 Suite, Apt. #, etc. 33 Date Incorporated or Qualifed 11/29/1993 4 FEI Number See Required See Required 6 Election Campaign Financing St. 00 May Be Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees 27 Country St. This corporation owes the current year Intangible Personal Property Tax. Yes No 9 Name and Address of Current Registered Agent HUSTY, TODD M 15050 N HWY 441 15050 N HWY 441
DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 11/29/1993 2. Principal Place of Business 15050 N Hay 2a. Mailing Address 25. DSD N. Hay 44.1 26. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 28. City & State 29. Country 21. Country 21. Country 22. Mailing Address 23. Lab 14. Fel Number 24. Suite, Apt. #, etc. 25. Certificate of Status Desired
2. Principal Place of Business 15050 N. Hard 2a. Mailing Address 4. FEI Number 59-32 14356 Not Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required City & State Country Zip Country State State Country State State Country State
2. Principal Place of Business 6050 N Hay 2a. Mailing Address 59-3214356 Suite, Apt. #, etc. 21 ProProp 1 26 15050 N. Hay 45 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 City & State 28 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Country 20 Country 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Country 28 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Country 20 Country 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 38 Suite, Apt. #, etc. 4. FEI Number 59-3214356 Suite, Apt. #, etc. 5. Certifcate of Status Desired See Required Fee Required Fee Required Suite, Apt. #, etc. 5. Certifcate of Status Desired See Required Fee Required Fee Required Suite, Apt. #, etc. 5. Certifcate of Status Desired See Required Fee Required Fee Required Fee Required Trust Fund Contribution owes the current year Intangible Personal Property Tax. 9. Name and Address of Current Registered Agent Name HUSTY, TODD M 15050 N HWY 441 82 Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
Suite, Apt. #, etc.
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State Country Coun
23 ELISTS FLORIS FLORIS STREET ADDRESS FLORIS FLORI
23 13 13 13 14 14 15 15 15 15 15 15
24 327 226 25 29 327 26 30 Personal Property Tax. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HUSTY, TODD M 15050 N HWY 441 ELIGIBLE FLAGRES
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HUSTY, TODD M 15050 N HWY 441 82 Street Address (P.O. Box Number is Not Acceptable)
HUSTY, TODD M 15050 N HWY 441 ELECTION FILED FI
HUSTY, TODD M 15050 N HWY 441 Street Address (P.O. Box Number is Not Acceptable)
15050 N HWY 441 Street Address (P.O. Box Number is Not Acceptable)
EUSTIS FL 32726 83
1 - 1
FL 85 Zip Code
11. Pursuant to the provisions of Sections 697,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
11. Pursuant to the provisions of Sections 667.0502 and 607.0508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the objection 607.0505, Florida Statutes.
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SIGNATURE Signature, type of refrired name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D Change Addition
NAME HUSTY, TODD M 12 NAME
STREET ADDRESS 15050 N HWY 441 1.3 STREET ADDRESS
CITY-ST-ZIP EUSTIS FL 32726 1.4 CITY-ST-ZIP
TITLE DELETE 2:1 TITLE Change Addition
NAME 2.2 NAME
STREET ADDRESS 2.3 STREET ADDRESS
CITY-ST-ZIP
NAME 32 NAME
STREET ADDRESS 3.3 STREET ADDRESS
CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE □ DELETE 4.1 TITLE □ Change □ Addition
NAME 4.2 NAME
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CITY-ST-ZIP
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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 eceiver or trustee empowered to execut this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or optimal adaptment with an address, with all other like empowered.

SIGNATURE:

INVANTULE MATERIAL M. HUSTY 4.57.99 352-742-1981

INTERESTINATION DATE OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

R2E034 (11/9)