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

FILED Jan 29, 1999 8:00am Secretary of State

01-29-1999 90055 034 ***158.75

	_					A 4. 16 6. 1.							
	$\overline{}$	\sim 1	184	IEN	T = H		-	_	-		_	_	
	h [16.	H. a. P	-111//	I - I J	- [no. 22	A 12 (2)	СЪЛ	r.w	w.		K M	11	٩.
7			J. I V I	الاستاا		-10 m	-44	. I → BL ,			м	1	. 1.
â.		A		1000		A 1 175		\mathbf{c}	,,	\mathbf{v}	\sim	\sim	14

· Markey	VANAGEMENT INC							
Principal Plac	ce of Business	Mailing Address				IRAN BONT BONT GO	ii a 18111 8 8	HERE BEIDE EINE INNE
1662 9TH ST	SOUTH	1662 9TH ST SOUTH						
ST PETERSBU	JRG FL 33701	ST PETERSBURG FL 33701	t		DO NOT ME	RITE IN THIS S	DA 05	
US		US			Date Incorporated or Qualifect		PACE	
	The state of the s				02/04/1994			
2. Principal I	Place of Business	2a. Mailing Address			4. FEI Number		$\Box\Box$	Applied For
21 .	1 - Sept. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	26			59-3230395			Not Applicable
Suite, Apt	t. #, etc.	i Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional
City & Sta	13.13	City & State						Required
23	100 · · · · · · · · · · · · · · · · · ·	28			6. Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the cur	rent vear Intan		d to rees
24	25	29	30		Personal Property Tax.	-] Yes	⊡No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New	Registered Ag	gent	
555	35 (14 (1 (1) (1))	on history i	8	11 Name				· .
BEF	RTHELOT, MARLENE 82ND AVE		8	2 Street Add	iress (P.O. Box Number is Not Accept	table)		
1	and the second s				* \$\$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$	* **** # /+65 +#*		· **** Bis - P. Bugs (Bib)
31.	PETERSBURG FL 33702		8	3			1	
		**	. 8	4 City		(a) a = 1 (3 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 +	85 Zip	p Code
4000 000 00				<u> </u>		FL	L	
office or	t to the provisions of Sections 607.0502 registered agent, or both, in the State of	. and 607.1508, Florida Statute if Florida. Such change was at	es, the abo	ve-named con	poration submits this statement for the	purpose of ch	anging i	its registered
1 112				v the corporat	ion s boatu oi directors, i nereby acce			
ੀਤੇ agent. I a	am tamiliar with, and accept the obligati	ons of, Section 607.0505, Flor	rida Statute	by the corporat es.		spr tile appoint	ngin do	registeren
SIGNATURE		ons of, Section 607.0505, Flor	rida Statute	es.	•			————
SIGNATURE	Signature, typed or printed name of registered agent	ons of, Section 607.0505, Flor and title if applicable. (NOTE:	rida Statute	es.	ed when reinstating)	DATE		
SIGNATURE		ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS	Registered Ag	98. Pent signature requir	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECT	TORS IN 12
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	ons of, Section 607.0505, Flor and title if applicable. (NOTE:	rida Statute	96. ent signature requir	ed when reinstating)	DATE FICERS AND		TORS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME	96. ent signature requir	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECT	TORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME	ent signature requir	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECT	TORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	OFFICERS AND BETHELOT, MARLENE C 210 82ND AVE. NORTH	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME	ent signature require ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND BETHELOT, MARLENE C 210 82ND AVE. NORTH	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY-	ent signature require ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature require ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	eent signature require ET ADDRESS ST- ZIP EET ADDRESS	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE	ent signature require ET ADDRESS ST- ZIP ET ADDRESS - ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY-	eent signature require EET ADDRESS ST- ZIP EET ADDRESS -ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY- 3.1 TITLE 3.2 NAME	eent signature require EET ADDRESS ST- ZIP EET ADDRESS -ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE: 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE! 3.4 CITY-	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 3.2 NAME 3.3 STREI 3.4 CITY- 4.1 TITLE	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 3.2 NAME 3.3 STREI 3.4 CITY- 4.1 TITLE 4.2 NAME	ent signature require EET ADDRESS ST-ZIP EET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS SITE TADDRESS SITE TADDRESS SITE TADDRESS SITE TADDRESS	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAME 4.3 STREI	ent signature require EET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ET ADDRESS	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAME 4.3 STREI 4.4 CITY- 4.4 CITY- 4.4 CITY-	ent signature require EET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAME 4.3 STREI	ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FFICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: D DIRECTORS DELETE DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.	ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECT Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agant OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY-	ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	Change Change Change	TORS IN 12 e
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	ons of, Section 607.0505, Flor and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.4 CITY- 3.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 5.4 CITY- 5.1 TITLE 5.2 NAME 5.4 CITY- 5.1 TITLE 5.2 NAME 6.1 TITLE 6.2 NAME	ET ADDRESS ST-ZIP	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	Change Change Change	TORS IN 12 e

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 eddess, with all other like empowered.

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-7-99

Daytime Phone #