Suble, Apt. #, etc.       Suble, Apt. #, etc.       S. Certification       \$5.75 Addition         City & State       27       Converting Con	ANN	PROFIT DRPORATION NUAL REPORT 1999		Katheri Secretar DIVISION OF (	RTMENT OF STATE ine Harris y of State CORPORATIONS		<b>1999 8:00</b> <b>ry of Sta</b> 90027 031 ***150.0	
2. Principal Place of Business         2a. Main Address         4. FEI Numer         Indext of Applier F.           Suite, Ap. IF, etc.         20a         593-3223842         Not Applier F.           2. Or A State         210         Suite, Ap. IF, etc.         593-3223842         Not Applier F.           2. Or A State         210         Curve Status Desired         Feat Applier F.         Status Desired         Feat Applier F.           2. Or A State         210         Country         8. Election Campaign Financing         Status Desired         Status Desired         Status Desired         Feat Address of Current year Internation Feat Applier Feat Applier Feat Applier Feat Address of New Registered Appent           3. Or All Status         210         Country         8. This corporation overs the current year Internation Feat Applier Feat Address of New Registered Agent         International Address of New Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           11. Pursuant to the provisions of Sections 6.07.0502 and 607.1508, Photdia Statutes, the above newed corporation submits the attainment for the purpose of changing its negister dagent         11. Name         10. Name and Address of Corporation registered Agent           12. OFFICERS AND DIRECTORS         13. Address         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1         13. Address         13. Address           12. OFFICERS AND DIRECTOR	FRINGI Principal Pla 619 S. EVER	E BENEFITS CONSUL ace of Business RGREEN AVENUE R FL 34910	LTANTS, INC. Mail 1619	ing Address S. EVERGREEN AVEN RWATER FL <del>34610-</del>		DO NOT WE	RITE IN THIS SPACE	
Bit         Suite, Apt. #, etc.         Suit	2. Principal	Place of Business	2a. M	Mailing Address				
Sulle, Apt. #, etc.         Sulle, Apt. #, etc.         Sulle, Apt. #, etc.         S. Certificate of Status Desired         \$ 8, 75 Aution For Required           Chy & State         2         Country         2         State Country         \$ 5, 00 May De Front Pract Contribution           20         Country         2         Country         8. This corporation ones the current year Intangible Personal Property Tax.         Image State State         \$ State         \$ State <td>1</td> <td></td> <td>⊢-<u>,</u></td> <td></td> <td></td> <td></td> <td>·</td> <td>ot Applicab</td>	1		⊢- <u>,</u>				·	ot Applicab
21       City & State       City & State       City & State       St		ot. #, etc.		Suite, Apt. #, etc.			\$8.75	Additional
20     Country     Zp     Country     Zp     Country     Zp     Country     Zp     Country     Zp     Country     Zp     Country     S. This provision over the current year intemptible     Personal Property Tax.     Ves     Yes     Yes     So		ate ,		City & State			Fee R	•
E. In Standard Program 200 (200 (200 (200 (200 (200 (200 (200			28				00.c¢Added	May Be to Fees
S. Name and Address of Current Registered Agent     TANNER, GLENN E     1619 S EVERGREEN AVE     CLEARWATER FL 94646 3 3 7 5 4     Street Address (P.O. Box Number is Not Acceptable)     Street Address     Street Add	¬ `			· ,			· <u>-</u>	N.
TANNER, GLENN E.       1619 S EVERGREEN AVE         019 SEVERGREEN AVE       2015         010 CLEARWATER FL 94646 3 3 7 5 4       33         32       34         34       64         64       City         71. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chaloging its registered agent. To the this and coopt the obligations of, Section 607.0502, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. To the purpose of chaloging its reg	• I		ب این جرا		30	the second s		No.
2.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1         ILE       PSD       □ DELETE       1.1TTLE       □ Change       □ Ad         MHE       TANNER, ROSE M       □ DELETE       1.1TTLE       □ Change       □ Ad         MHE       TANNER, ROSE M       □ S. EVERGREEN AVE       □ Change       □ Ad         IN ST.2P       CLEARWATER FL       □ Ad       □ Change       □ Ad         ME       TANNER, GLENN E       □ DELETE       21 TTLE       □ Change       □ Ad         ME       TANNER, GLENN E       □ DELETE       21 TTLE       □ Change       □ Ad         ME       TANNER, GLENN E       □ DELETE       21 TTLE       □ Change       □ Ad         ME       TANNER, GLENN E       □ DELETE       21 TTLE       □ Change       □ Ad         ME       TANNER, GLENN E       □ DELETE       31 TTLE       □ Change       □ Ad         ME       □ DELETE       31 TTLE       □ Change       □ Ad         ME       □ DELETE       31 TTLE       □ Change       □ Ad         ME       □ DELETE       41 TTLE       □ Change       □ Ad         ME       □ DELETE       41 TTLE       □ Change				•	84 City		FI 85 Zip	Code
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TREET ADDRESS       1619 S. EVERGREEN AVE       13 STREET ADDRESS         TYY-ST-ZP       CLEARWATER FL       14 CITY-ST-ZP         TITLE       VTD       DELETE       21 TITLE         AME       TANNER, GLENN E       22 NAWE       Add         TREET ADDRESS       1619 S. EVERGREEN AVE       23 STREET ADDRESS       CLEARWATER FL       Add         TITLE       Z COTY-ST-ZP       CLEARWATER FL       24 COTY-ST-ZP       Change       Add         TREET ADDRESS       CLEARWATER FL       Z COTY-ST-ZP       Change       Add         TREET ADDRESS       STITTLE       Change       Add         AME       32 NAME       33 STREET ADDRESS       Change       Add         TREET ADDRESS       33 STREET ADDRESS       TITLE       Change       Add         AME       AME       32 NAME       STREET ADDRESS       Add	agent. I SIGNATURE	am familiar with, and accept	the obligations of, So	such change was au ection 607.0505, Flori plicable. (NOTE:	s, the above-named cor thorized by the corporat da Statutes.	tion s board of directors. I hereby acce	PL   e purpose of changing its pt the appointment as re	registered gistered
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4. 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 informatio	Agent. I agent. I SIGNATURE 2. TREETADDRESS TY-ST-ZIP TLE AME TREETADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME	Signature, typed or printed name of r Signature, typed or printed name of r OFFI PSD TANNER, ROSE M 1619 S. EVERGREEN A CLEARWATER FL VTD TANNER, GLENN E 1619 S. EVERGREEN A CLEARWATER FL	the obligations of, St registered agent and title if ap ICERS AND DIRECT		s, the above-named corr thorized by the corporat da Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	tion s board of directors. I hereby acce	Purpose of changing its purpose of changing its pate DATE FICERS AND DIRECTO Change Change Change Change Change Change Change	RS IN 12 Addition