## 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 # P94000046238

1. Corporation Name
LYS BUSINESS SERVICES, INC.

## **FILED** Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90029 031 \*\*\*150.00



F12 BOSINEOS OFTITIONS		•			
	Mailing Address				
Principal Place of Business  1313 E EDGEWOOD DR  313 F FDGEWOOD DR			DO NOT WRITE IN THIS SPACE		· 
AKELAND FL 33803-3225	•		3. Date Incorporated or Qualified 06/21/1994	. :	
			4. FEI Number	Applied F	
2. Principal Place of Business	2a. Mailing Address		59-3272183	\$8.75 Addition	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required	<u></u>
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May E Added to Fee	s
¬	28	Country	This corporation owes the current year	r Intangible □ Ves □ No	, [
Zip Country	— <sup>∠ip</sup> —	Journa y	Descend Property Tax.	<u> </u>	
las	29 30		10. Name and Address of New Register	rea Agent	
24 Address of Curren	t Registered Agent	81 Name	<del>-</del>		
	Taylor Williams Serve Bur Beach	an Street Add	ress (P.O. Box Number is Not Acceptable)		
SLICKER, L. YVONNE		82 Street Add	71. + 180	1966、1466、1946年1956年195日 1968、1967年1958年1958年1958年1958年1958年1958年1958年1958	(4)
1313 E EDGEWOOD DR		83		聽環門即國	<b>連盟</b>
LAKELAND FL 33803-3225	•	84 City	1 (8 1 2 2 3 1 3 4 2 3 4 3 4 3 4 3 4 4 4 4 4 4 4 4 4 4	FL 85 Zip Code	1
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent I am familiar with, and accept the obligations.	man e		poration submits this statement for the purpos	se of changing its register	stered
was a consultation of Sections 607,050	2 and 607.1508, Florida Statutes, t	the above-named cor orized by the corporat	tion's board of directors. I hereby accept the a	ippointment as registe	
11. Pursuant to the provisions of Section, in the State office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	of Florida. Such change was authoritions of Section 607,0505, Florida	Statutes.	- <del>K)</del>	49197	·
agent. I am familiar with, and accept the obliga-	took Tree	و عمدره و			
SIGNATURE Signature, typed or printed name of registered age	ent and title it applications.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS	IN 12
OFFICERS A	ND DIRECTORS/	13.	30 35 350	Change L	Addition .
12.	☐ DELETE	1.1 TITLE			
SLICKER, TM		1.2 NAME	÷.		
4040 E EDGEWOOD DR		1.3 STREET ADDRESS	1	<u> </u>	- Addistra
1 AKELAND FI	· 	1.4 CITY-ST-ZIP		Change	Addition
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TITLE			•		
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
	nawaaaa	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change	
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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 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 address, with all other like empowered.