## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

0

DIVISION OF CORPORATIONS

DOCUMENT # P94000477

JIM SINES INSURANCE AGENCY, INC.

## FILED Aug 09, 1999 8:00 am Secretary of State

08-09-1999 90001 020 \*\*\*150.00



714 79TH CIRCLE SOUTH ST. PETERSBURG FL 33707  714 79TH CIRCLE SOUTH ST. PETERSBURG FL 33707  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 06/22/1994  2. Principal Place of Business 26  Suite, Apt. #, etc. 27  Suite, Apt. #, etc. 27  City & State City & Country  Zip Country  To Not Applied For Not Applied For Source So	Principal Place	of Rusiness	Mailing Address				N MAST MAST MI		<b>8881 7</b> 111	l Siel leef
SI. PETERSBURG PL 33707  SI. PETERSBURG PL 33707  SI. Date Incorporation of Cultifler OS/22/1994  2. Principal Place of Business  2. Mating Address  2. Mating Address  3. Certificate of Status Desired  5. Sep248860  No. Applied For Sep21994  Suite, Apt. #. etc.  Suite, Apt. #. etc.  Suite, Apt. #. etc.  Suite, Apt. #. etc.  City & State  City & Country  City &	•		<del>-</del>	_						
2. Principal Place of Business										
Principal Place of Business   2a Mailing Address   4. FEIN Number   Applied For   Mail Application   59-3248860   Suite, Appl. #, etc.   South, Appl. #, etc.				· <del>•</del> ·		DO NOT WRITE	IN THIS SE	PACE		
2. Principal Piace of Business   2. Mailing Address   3. Eli Number   Applied Fort   5.9.3248880   Not Applied Fort   5.9.3248880   Not Applied Fort   5.9.3248880   Not Applied Fort   5.9.3248880   Not Applied Fort   5.9.3248880   S. Certificate of Status Desired   \$8.75 Additional   5.00 May 8 to Applied Fort   5.00 May 8 to Appli	-	Separate Sep	in the second	<b></b> .		' -				-
Sulfe, Apt. 8, etc.	2. Principal Pl	ace of Business	2a. Mailing Address						Applied	1 For
Suite, Apt. F. etc.    Suite, Apt. F. etc.   27   27   27   27   27   27   27   2	21					59-3248860			Not Ap	plicable
27   City A State	Suite, Apt. i	#, etc.					$\overline{\Box}$	\$8.75	5 Addit	ional
City & State    City & State	22		27			5. Certificate of Status Desired		Fee	Requir	ed
20   20   20   20   20   20   20   20		9				6. Election Campaign Financing		\$5.0	<b>0</b> May	Be
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statument 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 submits this statument 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 submits this statument 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 submits this statument 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 submits this statument 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 submits this statument 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 submits this statument for the purpose of changing its registered difference of the purpose of change its registered agent. In a familiar with, and eccept the obligations of, section 607,0505, Florida Statutes.  12.	23		28			Trust Fund Contribution		Adde	d to Fe	es
9. Name and Address of Current Registered Agent  SINES, JAMES J 714 79TH CIRCLE SOUTH ST. PETERSBURG FL 33707  11. Pursuant to the provisions of sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the obligations of section 507.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the obligations of, section 607.0505. Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS  13. TITLE  12. NAME  13. STREET ADDRESS  14. CITYS 12.P  14. CITYS 12.P  15. PETERSBURG FL 33707  16. CITYS 12.P  17. PETERSBURG FL 33707  16. CITYS 12.P  17. PURSUANT TO THE CITY	Zip	Country	Zip	Cou	ntry	8. This corporation owes the currer	nt year		$\overline{}$	
SINES, JAMES J 714 79TH CIRCLE SOUTH ST. PETERSBURG FL 33707  82 Street Address (P.O. Box Number is Not Acceptable)  83 Sines Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Stp Code  85 City FL 85 Stp Code  86 City FL 85 Stp Code  87 Signature to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, and the obligations of, section 607,0505, Florida Statutes, the above named of directions, I horize provide the provisions of sections, I horize provided the provisions of sections, I horize provisions of sections, I horize provided the provisions of sections, I horize provisions as statement of the purpose of horize provisions as statement of the sections, I horize provisions, I have provided the provisions of sections, I horize provisi	24	25	29	30					No	
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T14 PSTH CIRCLE SOUTH ST. PETERSBURG FL 33707  11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above seather-based by the 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 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 submits this statement for the purpose of changing its registered office or registered agent, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DELETE  11 TITLE  DELETE  11 TITLE  DELETE  11 TITLE  DELETE  11 TITLE  DELETE  12 TITLE  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND Addition  ADDITIONS/CHANGES TO OFFICERS AND Addition  ADDITIONS/CHANGES TO OFFICERS AND ADDITIONS/CHANGES TO OFFICERS AND ADDITIONS/CHANG	CIAIC.	FO MATECIA			81 Name					
ST. PETERSBURG FL 33707    34   City   FL   85   Zip Code					82 Street Add	ress (P.O. Box Number is Not Acceptab	le)			
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florido Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and remiliar with, and accept the obligations of, section 807.0508, Florida Statutes.  SIGNATURE  Operation, typed or primer name of registered agent and the if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  D SINES, JAMES J  STREET ADDRESS  ST. PETERSBURG FL 33707  DELETE  2 YITHE  DELETE  2 YITHE  DELETE  3 YITHE  DELETE  3 YITHE  DELETE  3 YAME  3 STREET ADDRESS  2 COTYST-2P  TITLE  DELETE  3 YAME  3 STREET ADDRESS  2 COTYST-2P  TITLE  DELETE  3 YAME  3 STREET ADDRESS  2 COTYST-2P  TITLE  DELETE  3 YAME  3 STREET ADDRESS  2 COTYST-2P  TITLE  DELETE  3 YAME  3 STREET ADDRESS  2 COTYST-2P  TITLE  DELETE  3 YAME  3 STREET ADDRESS  COTYST-2P  TITLE  DELETE  5 TITLE  DELETE  5 TITLE  Change  Addition  Addition  AMAE  STREET ADDRESS  COTYST-2P  TITLE  DELETE  5 TITLE  Change  Addition  Addition  AMAE  STREET ADDRESS  COTYST-2P  TITLE  DELETE  5 TITLE  Change  Addition  Addition  AMAE  STREET ADDRESS  COTYST-2P  TITLE  DELETE  5 TITLE  Change  Addition  Addition  AMAE  STREET ADDRESS  COTYST-2P  TITLE  DELETE  5 TITLE  Change  Addition  Addition  AMAE  STREET ADDRESS  COTYST-2P  TITLE  Change  Addition  Addition  ADDITIONS/CHANGES IN Experimental Appear appear and appear and appear										
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T1. Pursuant to the provisions of sactions 807 0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 obligations of, section 607.0505, Floridas Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D					84 City			85 Z	ip Code	<del></del>
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  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	STREET ADDRESS			5.3 ST	REET ADDRESS					
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Jim Sines Insurance Agency 714 79th Circle South St. Petersburg, FL 33707

> Telephone 727-381-8881 800-392-1285

> > Fax 727-381-8883

August 2, 1999

Division of Corporations Annual Reports Filings PO Box 1500 Tallahassee, FI 32302-1500

I recently received a 2nd notice from the Florida Department of State, Division of Corporations and it stated that filing fee is now \$550.00. I did not received the first notice, so I called the Division of Corporations and they said I could just send in the amount of \$150.00 and ignore the \$400.00 late fee.

Sincerely,

James J. Sines