## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

## **Katherine Harris** Secretary of State

## **FILED** Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90065 001 \*\*\*150.00

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DOC 1. Corpor BOGA	UMENT # P9400 ART PROGRAMMING ENTER	0056931 Prises, Inc.		†   <b>             </b>	1/81 B1((8 S(r)8 (8188 1/48 1/48 1/48 1/48 1/48 1/48 1/48
Principal Place of Business  Mailing Address  10505-30TH AVENUE EAST PALMETTO FL 34221 US  Mailing Address  10505-30TH AVENUE EAST PALMETTO FL 34221 US		ST	DO NOT WRITE IN THIS SPACE		
	Place of Business	2a. Mailing Address		3. Date Incorporated or Qualifed 08/01/1994	IS SPACE
Suite, Ap	ot. #, etc.	26 Suite, Apt. #, etc.	<del></del>	4. FEI Number 94-3243291	Applied For
City & Si	tate	City & State		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
Zip	Country	28 Zip		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
24	25 9. Name and Address of Curre	20	Country 30	This corporation owes the current year in Personal Property Tax.	Added to Fees  Itangible  Yes No
11 Pursuant	Signature, typed or printed name of registered agen OFFICERS AN PSTD PIERCE, VALERIE	t and title if applicable. (NOTE:	83 84 City	ress (P.O. Box Number is Not Acceptable)  FL  oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AN	ent as registered
STREET ADDRESS CITY-ST-ZIP TITLE	10505-30TH AVENUE EAST PALMETTO FL		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	•	
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		☐ Change ☐ Addition
ITLE IAME TREET ADDRESS		☐ DELETE	2.4 C/TY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change Addition
ITLE Ame		☐ DELETE	3.4. City-St-ZIP 4.1 Title		☐ Change ☐ Addition
TREET ADDRESS ITY-ST-ZIP TLE			4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
AME TREET ADDRESS TY-ST-ZIP TLE		□ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition
AME REET ADDRESS TY-ST-ZIP		□ OELÉTE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		Change Addition
1. I hereby cert	ify that the information supplied with the	nis filing does not applifute at	6.4 CITY-ST-ZIP		Ì

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 Block 12 or Block 13 if changed, or on an attactment with an address with all other like empowered.

SIGNATURE:

CIT

02:02.99

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