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 # P9400062968 1. Corporation Name

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

02-03-1999 90017 024 ***150.00

Bajama	AT, INC.						
		****					, 1
Principal Plac	e of Business	Mailing Address					
31755 S.R. 70		P.O. BOX 99 Myakka City Fl 34251					
MYAKKA CITY FL 34251 MYAKKA CITY FL 34251				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
•					08/25/1994		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0515435		Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	T	5 Additional Required
22		27	-				
City & Star	te . T	City & State			6. Election Campaign Financing		00 May Be led to Fees
23		28	Cour	ntnı	Trust Fund Contribution		ed to rees
Zip	Country	Zip	Cou 30	iiu y	This corporation owes the current y Personal Property Tax.	/ear intangible ☐ Yes	□No
24	9. Name and Address of Curren	29 29 Agent	[30]	· -	10. Name and Address of New Regis		
	9. Name and Address of Curren	A Programme Agent		81 Name			
SMI	TH, ROBERT J JR.	•		82 Street	Address (D.O. Roy Number is Not Acceptable)	 	
37155 S.R. 70 EAST				oz Street	Address (P.O. Box Number is Not Acceptable)		
MY	AKKA CITY FL 34251			83			
				84 City			Zip Code
a)				'		FL Ti	
11. Pursuan	t to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	tes, the al	bove-named	d corporation submits this statement for the purporation's board of directors. I hereby accept the	ose of changing	its registered
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a itions of, Section 607.0505, Flo	iuthonzed irida Stati	s by the comp utes.	poration's board of directors. I hereby accept the	s appointment a	3 registered
SIGNATURE							
SIGNATURE	Signature, typed or printed name of registered ager		: Registered	Agent signature	, 1040	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	
TITLE	D DODENT LIB	☐ DELETE	1.1 70		CE OF WAY		ige
NAME	SMITH, ROBERT J JR.		1.2 N		_ [•	ļ
STREET ADDRESS				REET ADDRESS			
CTTY-ST-ZIP	MYAKKA CITY FL 34251	☐ DELETE	2,1 TI	TY-ST-ZIP	<u> </u>		TANKO-
TITLE	D CANTEL IANIEWE M		2,, 11	166		☐ Char	nge Addition
NAME	SMITH, JANIEVE M		22.89	***		∐ Chai	nge L Addition
STREET ADDRESS	s 9702 284TH ST. EAST MYAKKA CITY FL-34251		2.2 N/			∐ Chai	ige ∐ Addition
CITY-ST-ZIP		e a silitado in los as	2.3 \$7	TREET ADDRESS	S	∐ Chai	nge Addition
TITLE NAME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DELETE	2.3 \$7	TREET ADDRESS	S	Char	
	TERROR LA		2.3 ST 2.4 C	TREET ADDRESS ITY-ST-ZIP TLE	S		
19 134 137 3	TELECORITA (C.)		2.3 ST 2.4 C 3.1 TT 3.2 N/	TREET ADDRESS ITY-ST-ZIP TLE			<u> </u>
STREET ADDRESS	TELECORITA (C.)		2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST	TREET ADDRESS HTY-ST-ZIP TLE AME	S (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	☐ Char	nge Addition
19 134 137 3	TELECORITA (C.)		2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST	TREET ADDRESS HTY-ST-ZIP TLE AME TREET ADDRESS HTY-ST-ZIP	S (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	☐ Char	<u> </u>
STREET ADDRESS CITY-ST-ZIP TITLE	ANY CONTRACTOR	DELETE	2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4. C	TREET ADDRESS HTY-ST-ZIP TLE AME TREET ADDRESS HTY-ST-ZIP TLE	S (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	A NOW COME TO SERVICE A SERVICE AS A SERVICE	DELETE	2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4. C 4.1 TT 4.2 N/	TREET ADDRESS HTY-ST-ZIP TLE AME TREET ADDRESS HTY-ST-ZIP TLE	S (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP	A NOW COME TO SERVICE A SERVICE AS A SERVICE	DELETE	2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST	TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE	S (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	A NOW COME TO SERVICE A SERVICE AS A SERVICE	DELETE	2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST	TREET ADDRESS STTY-ST-ZIP TLE AME TREET ADDRESS STY-ST-ZIP TLE AME TREET ADDRESS TREET ADDRESS	S	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	A NOW COME TO SERVICE A SERVICE AS A SERVICE	DELETE	23 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 . C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 NV	TREET ADDRESS HTY-ST-ZIP TLE AME TREET ADDRESS HTY-ST-ZIP TLE AME TREET ADDRESS HTY-ST-ZIP TREET ADDRESS HTY-ST-ZIP TLE AME TREET ADDRESS	S	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S S S S S S S S S S S S S S S S S S S	DELETE	23 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 . C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 NV	TREET ADDRESS STTY-ST-ZIP TLE AME TREET ADDRESS STY-ST-ZIP TLE AME TREET ADDRESS STY-ST-ZIP TLE TREET ADDRESS STY-ST-ZIP TLE	S S	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	s ti	DELETE	2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 NV 5.3 ST 5.4 CI	TREET ADDRESS STY-ST-ZIP TILE AME TREET ADDRESS STY-ST-ZIP TILE TREET ADDRESS TTY-ST-ZIP TILE AME TREET ADDRESS TTY-ST-ZIP TILE TREET ADDRESS TTY-ST-ZIP TILE TREET ADDRESS TREET ADDRESS	S	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	S EL	DELETE	2.3 ST 2.4 C 3.1 TT 32 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 N/ 5.3 ST 5.4 CI 6.1 TT 5.4 C 6.1 TT 5.5 C N/ 5.3 ST 5.4 CI 6.1 TT 5.5 C/ 5.3 ST 5.3 ST 5.4 CI 6.1 TT 5.3 C	TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TITY-ST-ZIP TLE TREET ADDRESS TITY-ST-ZIP TLE TREET ADDRESS TITY-ST-ZIP TLE	S S	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	S E	DELETE	2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 N/ 5.3 ST 5.4 CI 6.1 TT 6.2 N/	TREET ADDRESS TITY-ST-ZIP TILE AME	S	☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	S II.	DELETE DELETE	2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 Cl 5.1 TT 5.2 N/ 5.3 ST 5.4 Cl 6.1 TT 6.2 N/ 6.3 ST	TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TITY-ST-ZIP TLE TREET ADDRESS TITY-ST-ZIP TLE TREET ADDRESS TITY-ST-ZIP TLE	S	☐ Char	nge Addition

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.