Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90148 030 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000078364

1. Corporation Name

CADACOTA INVESTMENT GROUP INC

SANASC	YA INVESTMENT	311001 , 1110	•											
Principal Plac	e of Business		Mailing Address	_				'	10811061 (10 1611) BIBIS				•••	J1111 B1B1 (BB1
5125 WILLOW		5125 WILLOW LEAF DR SARASOTA FL 34241												
SARASOTA FL 34241 SARASOTA FL 34241								DO NOT WRITE IN THIS SPACE						
									ncorporated or Qu 5/1994	ıalifed				
2. Principal Place of Business			2a. Mailing Address					4. FEI Number				Applied For		
21			26					65-0533029				Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired				\$8.75 Additional		
22			27					J. Ceruic		ileu		F	ee Re	uired
City & 5 tate			City & State					6. Election Campaign Financing \$5.00						
23			28					Trust Fund Contribution Added to Fees						Fees
Zip	Country		Zíp 	Cou	ntry			1	rporation owes t	ne cum	ent year Ir			⊒No
24	25		29	30				1	al Property Tax.	Na F	and name of	Ye		INO
	9. Name and Adc res	s of Current Re	gistered Agent		81	Name		IU. Name	and Address of	New H	registere c	ı Ayent		
RUE	RNHAM, THOMAS N				[,									
	5 WILLOW LEAF DR				82	Stree	t Addre	ss (P.O. Bo)	Number is Not A	ccepta	ible)			
-	ASOTA FL 34241				83									
O 11	0,00,,,,,,				55									
					84	City					FI	85	Zip C	ode
	to the provisions of Section		1007 4F00 FL-23- 0(-)	- 45				السطاديم مداهما	in this statement	for the		of chang	ing ite	onistered
agent. I a	registered agent, or both, am familiar with, and accep	pt the obligat ons	s of, Section 607.0505, FI	orida Stati	utes.	•		when reinstating)			DATE			·
12.	Signature, typed or printed name of	FICERS AND D		13.	Ayen	u siynatur	a req illed		ONS/CHANGES	TO OF		ND DIR	ECTO	₹S IN 12
TITLE	<u> D</u>	TIOLITO AND	DELETE	1,1 TE	πE		\top						nange	Addition
NAME	BURNHAM, THOMAS	S N		12 NA	ME									
STREET ADDRESS	CAGE WILLOW LEAD			1.3 ST	REET	ADDRES	s							
CITY-ST-ZIP	SARASOTA FL 3424			1.4 CF	TY-ST	r-zip								
TITLE		-	☐ DELETE	21 TI		-	+-					□CI	nange	Addition
NAME				2.2 N/	AME									
STREET ADDRESS	3			2.3 \$1	REET	ADDRES	s							
CITY-ST-ZIP				2.4 C	ITY-S	T-ZIP								
TITLE	 		☐ DELETE	3.1 TI			T^{-}						ange	Addition
NAME				3.2 NA	WE									
STREET ADDRESS	s			3.3 \$1	REET	ADDRES	s							
CITY-ST-ZIP	1			3.4. C	TY-S	T-ZIP								
TITLE			☐ DELETE	4 1 TI	TLE							□ CI	nange	☐ Addition
NAME				4 2 N	AME									
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CITY-ST-ZIP				4.4 CI	TY-ST	T-ZIP	L							-
TITLE			☐ DELETE	5.1 TI	TLE							□ c	nange	Addition
NAME				5.2 N/	ME									
STREET ADDRESS	3			5.3 \$7	REET	ADDRES	s							
CITY-ST-ZIP				5.4 CI		T-ZIP								
TITLE			☐ DELETE	6 1 TI								C	nange	Addition
NAME				6.2 N										
STREET ANDRESS	2)			6.3 ST	REET	ADDRES	Sì							

14. 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 attack ment with an address, with all other like empowered.

6.4 CITY- ST-ZIP

SIGNATURE:

CITY-ST-ZIP

INTED NAME OF SIGNING OFFICER OR DIRECTOR