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

FILED Feb 16, 1999 8:00am **Secretary of State**

1. Co.porau	IMENT # P9400 DUSTRIES, INC.	00081622			02-16-1999 90053 0		
Principal Place of Business Mailing Address					EDI (ID IDII) EIEII ADII! EDIII	8011: 0018: 18:61 1410 G	III IFALB (IB) IOB)
805 E. SYLVAN DR 805 E. SYLVAN DR							
BRANDON FL		BRANDON FL 33510					
				,	DO NOT WRITE	IN THIS SPACE	
				3. Date Incor	orated or Qualifed		
				11/03/1	994		
Principal Place of Business 2a. Mailing Address				4. FEI Numbe		7 7	Applied For
21 26			59-3274	59-3274779		ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·			\$8.75	Additional	
27			5. Certifcate of	of Status Desired [Required	
City & State City & State			6 Flection Co	mnaion Einancing			
23 28			6. Election Campaign Financing Trust Fund Contribution		S5.00 May Be Added to Fees		
		Zip	Country				in rees
24 25		29	30		ation owes the current roperty Tax.	t year Intangible ☐ Yes	· [2] No
	9. Name and Address of Curi		[30]		Address of New Reg		:
			81 Nan		Addiess of New Neg	istered Agent	
, TAP	PAN, MOORE JR.			,	· · · · · · · · · · · · · · · · · · ·	•	* . * .
805 E SYLVAN DR BRANDON FL 33510			82 Stre	et Address (P.O. Box Nur			
				* 4	and the second state of the second	ar e stare	11 B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			83	Sal			
			84 City		<u>an in the same and a second contract of the </u>	es Zic	Code
	to the provisions of Sections 607.0 registered agent, or both, in the State familiar with, and accept the obli		,			FL `	
SIGNATURE	Signature, typed or printed name of registered a	· · · · · · · · · · · · · · · · · · ·				DATE	
TITLE	D	AND DIRECTORS	13.		CHANGES TO OFFIC		
	TAPPAN, MOORE JR.	□ DELETE	1.1 TAILE	A. Carrier	. 34.	Change	☐ Addition
NAME			1.2 NAME		•		
STREET ADDRESS	805 E SYLVAN DR		1.3 STREET ADDRES	s			
CITY-ST-ZIP	BRANDON FL 33510		1.4 CITY-ST-ZiP				
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	Tappan, Linda M		2.2 NAME				1
STREET ADDRESS	805 E SYLVAN DR		2.3 STREET ADDRES	s			1
CITY-ST-ZIP	BRANDON FL 33510		2.4 CITY-ST-ZIP	·	, · · · · · · · · · · · · · · ·	£	
TITLE		☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRES	s			
CITY-ST-ZIP	1 · 1 · 1 · 1		3.4. CITY-ST-ZIP	1			
TITLE		☐ DELETE	4.1 TITLE		19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Change	☐ Addition
NAME						Change	Addition
STREET ADDRESS			4. 2 NAME	_			
			4.3 STREET ADORES	S .			İ
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME	,			ļ
STREET ADDRESS	2 t 3 ·		5.3 STREET ADDRES	S			1
CITY-ST-ZIP	,		5.4 CITY-ST-ZIP				
TITLE							
		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME		Li DELETE	6.2 NAME			Change	L] Addition
NAME STREET ADDRESS		<u></u> DELETE		3		Change	L. 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.

SIGNATURE: Moore Transpar

20 Jas 1999 (\$13)689-4117