## 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 Mar 23, 1999 8:00 am Secretary of State 03-23-1999 90050 001 \*\*\*150.00

DOCUMENT #	P95000005576

BIRD, LUCAS & COMPANY, P.A.

	·				<u>—  </u>	. HITEL BY		
Principal Place	e of Business	Mailing Address				21187 EU	*** 12515 \$117 192	
	LE BLVD., N.E.	1325 SNELL ISLE BLVD., N.E	Ξ.					
Suite 217 St. Petersburg FL 33704		SUITE 217			DO NOT WRITE IN THIS SPACE			
		ST. PETERSBURG FL 33704			3. Date Incorporated or Qualifed			
					01/23/1995			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	17	Applied For	
1		26			59-3286329	-	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				8.75	Additional	
2		_ 27	_ <u></u> -,	·	5. Certificate of Status Desired	Fee I	Required	
City & Stat	e	City & State			6. Election Campaign Financing	\$5.0	0 May Be	
3		28			Trust Fund Contribution	Adde	d to Fees	
Zip	Country	Zip	Coul	ntry	8. This corporation owes the current year Intang		<b>-</b> 1	
4	25	_ <del>,                                    </del>	30		T Oldertain Topani, Term	Yes	□No	
	9. Name and Address of Curre	nt Registered Agent		nd N	10. Name and Address of New Registered Age	<u>int</u>		
1110	AC INCEDIA C		ĺ	81 Name				
	as, Joseph C 5 Snell Isle BLVD., N.E.			82 Street Add	ress (P.O. Box Number is Not Acceptable)			
	E 217			22		_ <del>_</del> _	<u> </u>	
	PETERSBURG FL 33704	•	}	83				
31.1	FEILINGOUNG FE 33/04		Ì	84 City	[8	35 Zij	p Code	
				'	poration submits this statement for the purpose of cha	ــــــــــــــــــــــــــــــــــــــ		
agent. I a	egistered agent, or both, in the State in familiar with, and accept the obliga	ations of, Section 607.0505, Flori	da Statu	ites.	on's board of directors. I hereby accept the appointment	vin do	.091310104	
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: F	Registered	Agent signature require				
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D			
TITLE	D	☐ DELETE .	1.1 TIT	LE		] Change	e Addition	
NAME	LUCAS, JOSEPH C		1.2 NA	ME				
STREET ADDRESS	1964 MASSACHUSETTS AVE.,	, NE	1.3 ST	REET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33703		-	Y-ST-ZIP		1 Ch		
IIILE	D	☐ DELETE	2.1 717	LE 1	L	] Change	e	
NAME	BIRD, LORRAINE F		2.2 NA	ME				
STREET ADDRESS	1875 MASSACHUSETTS AVE.	N.E.	2.3 ST	REET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33703		-	TY-ST-ZIP	·	1 <i>C</i> h	<u> </u>	
TITLE	- `	☐ DELETÉ	3.1 111		. لــ	] Chang	e 🗌 Addition	
NAME	·		3.2 NA	1				
STREET ADDRESS	}		L	REET ADDRESS				
CITY-ST-ZIP		□ Sp. ctr		TY-ST-ZIP		7 Change	e	
TITLE		☐ DELETE	4.5 TTI	1	Ĺ	Jonang	e El violigo	
NAME	,		4. 2 N	J				
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP		□ percer		ry-ST-ZIP	<del>_</del>	1 Chana	e	
TITLE		☐ DELETE	5.1 TIT		٠ ـ ـ	] Chang		
NAME				REET ADDRESS				
STREET ADDRESS				ţ				
CITY-ST-ZIP	<del></del>	□ DELETÉ	5.4 CI	Y-ST-ZIP		Change	e 🔲 Additio	
TITLE	,	☐ DELETÉ				_ onang	e U AGOIDO	
NAME			6.2 NA					
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP			6.4 CI	ry-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 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.