FILED Mar 22, 1999 8:00 am

Secretary of State

03-22-1999 90036 006 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000006609

1. Corporation Name

PRACTICAL SOFTWARE CREATIONS, INC.

1200028TH ST. NORTH

ST. PETERSBURG FL

DICKERSON, VICKY W

12000 28TH ST. N.

ST. PETERSBURG FL

}		,			
Principal Place of Business Mailing Address					i latitat ira istat girti astit astit gatit satit satit satit satit satit satit sati
12000 28TH STREET NORTH 12000 28TH STREET NORTH ST. PETERSBURG FL 33742 ST. PETERSBURG FL 33742					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 01/23/1995
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21 26					59-3348905 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22					5. Certificate of Status Desired
City & State City & State 23 28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip 29 30	Countr	у	8. This corporation owes the current year Intangible Personal Property Tax.
24 25 29 30 30 9. Name and Address of Current Registered Agent			'		10. Name and Address of New Registered Agent
FAZLIN, FAZAL A 12000 28TH ST. N. ST. PETERSBURG FL 33716 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author			82 83 84 the aboverized by	Street City	Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE					
			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 VP Change XXAddition
TITLE			1.1 TITLE		VF
NAME	Tracers, Tracers				ARNOLD, LARRY 12000 28TH ST. N.
OT OFTEDONIOO FI				ET ADDRESS	
CITY-ST-ZIP			1.4 CITY-	ST-ZIP	ST. PETERSBURG, FL 33716
ΠΠΕ			2.1 TITLE		1020
NAME	174CH4, 1674HHACE		2.2 NAME		GHADIALI, ZOHER
OT PETERONING EL			ET ADDRESS	12000 28TH STREET N.	
STATE OF THE PARTY		2.4 C/TY- 3.1 TITLE	ST-ZIP	ST. PETERSBURG, FL 33716	
TITLE		M ocrese			
NAME .	gerald e. Wilder		3.2 NAME		

CITY-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 ag er like empowered.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4: 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

☐ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CiTY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

FAZLIN 3/15/99 727-573-4567

☐ Change

☐ Change

☐ Addition

☐ Addition

☐ Addition