## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

JASPERSON, MARK D

ST. PETE BEACH FL 33706

450 75TH AVE.

Pr

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FLORIDA DEPARTMENŢ OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DIVISION OF CO.

DOCUMENT # P950001920 / 1. Corporation Name
450B CORP.

9. Name and Address of Current Registered Agent

FILED May 13, 1999 8:00 am Secretary of State

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**≣**¦#

85 Zip Code

05-13-1999 90005 004 \*\*\*158.75

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

		BEACH, FL DO NOT WRITE IN THIS SPACE  3. Data incorporated or Qualified  2. 1995
ncipal Place of Business	Mailing Address	
450 0546:010	The second of th	
750 15111 010	Of Orlandy mil	20 DO U El
ncipal Place of Business 450 15th 'QVL, St. Petersburg Bl	PAPEL EN STIPLESDUIGE	DO NOT WRITE IN THIS SPACE
SI. ICICI SOUT GE	33708	3 Date incorporated or Qualified
$\circ$	37/	manual a 1005
	00	I THEAT I IN
Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For
	26	59-3308895 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	\$8.75 Additional
, ,	27	5. Certificate of Status Desired Fee Required
City & State	City & State	6. Election Campaign Financing \$5.00 May Be
City & State	— ´	
	28	Trust Fund Contribution Added to Fees
Zíp Country	Zip Country	8. This corporation owes the current year Intangible
ا ا	20	Personal Property Tay

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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation'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	Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature requ	ired when reinstating) OATE
12,	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DELETE DELETE	1.1 TITLE	- Change Addition
NAME	MARY TASDECSOD	1.2 NAME	
STREET ADDRESS	MARK JASPERSON 713 PARK ST, ST, Pete, FL331	1.3 STREET ADDRESS	
CITY-ST-ZIP	110 PARK SI., SI, HETE, +LOSI	14 CITY-ST-ZIP	
TITLE .	DOST DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Thomas Still well	2.2 NAME	
STREET ADDRESS	Theresh Silicol	2.3 STREET ADDRESS	
CITY-ST-ZIP	Theresa Stillwell 713 Parkstyst, Pete, FL33711	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE		- Change Addition
NAME .		3.2 NAME	
STREET ADDRESS	•	33 STREET ADDRESS	
CITY-ST-ZIP	2. 0	34. CITY-ST-ZIP	
TME	☐ OELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	•	4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5 3 STREET ACCRESS	•
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		5.3 STREET ACCRESS	
CITY+ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filling 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 epigowered.

april 20, 1999