PROFIT **CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90296 010 ***150.00

		
DOCUMENT	#	P95000030635

7. Corporation												
MYERS	PRODUC	E, INC.						r andrend stå skildt åttig ådet 40til åk	1	A DIES BEZOT	STERE DESCRIPTION	
				•								!
Principal Place	e of Busines		Ma	alling Address				I INDIANA HA HARA ANH BAH BAH BAH	1 8 8 1 8 8 16 1 3 1	19119 91159		
12563 BISCAYN	_	~		63 BISCAYNE BLVD								i
MIAMI FL 33181				MI FL 33181				DO NOT WRITE IN	THIS SP	ACE		;
								3. Date incorporated or Qualified	11110 01			
								04/19/1995				
2. Principal P	lace of Busi	ness	2a.	Mailing Address				4. FEI Number			lied For	l
21	,		26					65-0575320			Applicable	1
Suite, Apt.	#, etc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired .	. ;	\$8.75 A Fee Re		-
City & Stat	e			City & State				6. Election Campaign Financing		\$5.00		
23			28				····	Trust Fund Contribution		Added to	Fees -	١.
Zip	·			Zip Country				8. This corporation owes the current year Intangible Personal Property Tax.				
24		25	[29]	lacad Ament	[30]			Personal Property Tax. 10. Name and Address of New Regis				ĺ
	9. Wame	and Address of Cur	teur vedisi	med Agent	· · · · · · · · · · · · · · · · · · ·	81	Name	IV. Italia with same				ĺ
MYE	rs, orvil	. D				82	Street Add	ress (P.O. Box Number is Not Acceptable)				ĺ
	3 BISCAY						30681 AGG	1833 (F.O. DOX 14011061 10 110 FACE)				,
MIA	VI FL 3318	31				83						l i
		•				84	City		FL I	85 Zip (
11. Pursuant	to the provis	sions of Sections 607.	0502 and 60	07.1508, Florida Stati	rtes, the a	bove	-named corr	poration submits this statement for the purp	appointm	enging its ent as rec	registered istered	1 1
agent la	registered aç ım familiar w	gent, or both, in the St with, and accept the ob	ligations of,	Section 607.0505, FI	orida Stati	utes.		oration submits this statement for the purpon's board of directors, I hereby accept the	-,,		¢'	
SIGNATURE									ATE			ي ا
12.	Signature, type	d or printed reme of registered OFFICERS	AND DIRE		13.	~		ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12	CR2F034 (11/98)
TITLE	D			☐ DELETE	1.1 Π	TLE			E] Change	☐ Addition	Ξ
NAME	MYERS,	ORVIL D		,12N		2 NAME						2
STREET ADDRESS	12563 BI	SCAYNE BLVD.			1.3 \$1	RET	ADDRESS					逆
CITY-ST-ZIP	N. MIAM) FL				TY-51	r-20P		······································	Change	Addition	e.
TITLE				□ DELETE	21 TT				L	"I comple	[_] Acciden	ΙĬ
NAME					2.2 NAME 2.3 STREET ADDRESS							
STREET ADDRESS	\						١ ١					
CITY-ST-ZIP	 -				2.4 CITY-ST-ZIP			Г] Change	Addition	[]	
TITLE	·	🗸 -		32N								l
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·				ADORESS		خ سملنت		- ــ ــ ــ ـــ			
CITY-ST-ZIP				11Y- <u>5</u>			-					
TITLE	 			DELETE 4.1 TI						Change	Addition	(
NAME					4.2 NA		.					
STREET ADDRESS	:				4.3 STRE		ADDRESS					
CITY-ST-ZIP					440	TY- 57	r-ZIP			7.65	T a serie	()
TITLE				DELETE	5.1 TF				L,] Change	☐ Addition	
NAME					5.2 N			•				;
STREET ADDRESS	ECI ADDRESS					ADORESS	•				;	
CITY-ST-ZIP				Fineter	5.4 CI 6.1 Ti		1-213		F	Change	Addition	
TITLE						L			Ι.			
					£9M	LEF.						
NAME STREET ADDRESS					62 N		ADDRESS					l i

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 early, 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.