

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

DOCUMENT # P95000038041

1. Corporation Name

EPAC DEVELOPMENT CORPORATION

Principal Place of Business

5380 N. OCEAN DR.
SUITE 10H
RIVIERA BEACH, SINGER ISLAND FL 33404

Mailing Address

5380 N. OCEAN DR.
SUITE 10H
RIVIERA BEACH, SINGER ISLAND FL 33404

FILED
Jan 21, 1999 8:00am
Secretary of State

01-21-1999 90058 011 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/12/1995

4. FEI Number

59-3321055

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D PETRIDES, MILTON D
STREET ADDRESS
5380 N. OCEAN DR., #10H
CITY-ST-ZIP
RIVIERA BEACH, SINGER ISLAND FL 33404

TITLE ☐ DELETE

NAME
D LYONS, CHRIS
STREET ADDRESS
5380 N. OCEAN DR., #10H
CITY-ST-ZIP
RIVIERA BEACH, SINGER ISLAND FL 33404

TITLE ☐ DELETE

NAME
D PETRIDES, DESPIN
STREET ADDRESS
5380 N. OCEAN DR., #10H
CITY-ST-ZIP
RIVIERA BEACH, SINGER ISLAND FL 33404

TITLE ☐ DELETE

NAME
D HUMES, J.T.
STREET ADDRESS
5380 N. OCEAN DR., #10H
CITY-ST-ZIP
RIVIERA BEACH, SINGER ISLAND FL 33404

TITLE ☐ DELETE

NAME
D LYONS, DEBBIE
STREET ADDRESS
5380 N. OCEAN DR., #10H
CITY-ST-ZIP
RIVIERA BEACH, SINGER ISLAND FL

TITLE ☐ DELETE

NAME
D
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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; that the receiver or transferor is authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if on the report or on an attachment to an address, with all other like empowers.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)