PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500040432

Principal Place of Business	Mailing Address
1348 WINDERGATE DR. JACKSONVILLE FL 32257 US	P.O. BOX 23396 JACKSONVILLE FL 32241-3396
2. Principal Place of Business 11 4029 LAZY HOLLOW LANG N Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.
22	27
City & State 23 JACKSONVINE F1.	City & State
	1291

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90015 042 ***150.00



2. Principal Pilece of Business 2. A. Malling Address 4. FEI Number	4348 WINDERGATE DR. JACKSONVILLE FL 32257 US	P.O. BOX 23396 JACKSONVILLE FL 32241-3396	3		DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 05/22/1995	SPACE	
Suite, Apt. F. ofc. Suite, Apt. F. ofc.	2. Principal Place of Business	2a. Mailing Address				A	pplied For
SUID. Apt. 4, etc. Suid. Apt. 4, etc. 27		26			59-3321371	N	lot Applicable
27						\$8.75	Additional
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Zip Country Zip Country Zip Country Zip Country St. This corporation owes the current year intengible Personal Property Tax. Yes No		⊢ '				T	
28 30			Country		This corporation owes the current year Inta	angible	
BRANT, MOORE, SAPP, MCDONALD & WELLS, P.A. SUITE 3100 - BARNETT CENTER 50 NORTH LAURA STREET JACKSONVILLE FL 32202 44 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 agent, or both, in the State of Florida. Suich change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the ediplosities of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the ediplosities of Section Statutes. SIGNATURE 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the ediplosities of Sections of Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. NAME 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. City 1. Title 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. City 1. Title 16. City 1. Title 17. Change 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADD		29	اه		1		□No
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SO NORTH LAURA STREET JACKSONVILLE FL 32202 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 807.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutos, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the origination of Sections Statutos. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. SIRECTADRESS AS WINDERGATE DR. 14. Any Myting Addition NAME 15. SIRECTADRESS AS WINDERGATE DR. 14. Any Myting Addition 15. SIRECTADRESS AS WINDERGATE DR. 16. SIRECTADRESS AS WINDERGATE DR. 17. SIRECTADRESS AS WINDERGATE DR. 18. SIRECTADRESS AS WINDERGATE DR. 19. SIRECTADRESS AS WINDERGATE			82	Street /	Address (P.O. Box Number is Not Acceptable)		
JACKSONVILLE FL 32202 88 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 507.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, and the originated agent or both and agent age			83				
Section Sect					- Hebby &	· ·	·
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	2.12.		84	City	FI	85 Zip	Code ·
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SIGNATURE TITLE	office or registered agent, or both, in the State of	Florida. Such change was auth	orized by	the corpo	pration's board of directors. I hereby accept the appoir	itment as r	egistered
Signature, typed or printed name of registered agent and title of spiritude. (NOTE Registered Agent signature required with a spiritude.) 12	agent. I am familiar with, and accept the obligation	ns of, Section 607.0505, Florida	a Statutes	•			
12.	SIGNATURE						
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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.

SIGNATURE AND REPORT OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR