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 # P95000077563

CONCERNE COLLEGE

STREET ADDRESS

CORVETTE COUNTRY, INC.

Mailing Address Principal Place of Business 3607 SW 12TH COURT **3607 SW 12TH COURT** FT-LAUDERDALE: FL-33012 FT. LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/09/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-2727104 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Zip Country Zip □No Personal Property Tax. 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KING, KENNETH 82 Street Address (P.O. Box Number is Not Acceptable) **3607 SW 12TH COURT** FT. LAUDERDALE FL 33312 83 85 Zip Code 84 City 10/607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered librida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of, Section 607.0505, Elorida Statutes. ections 607.050 11. Pursuant to the provisions of both, in the State office or registered agent d accept the oblide agent. I am familiar with SIGNATURE CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition ☐ DELETE ☐ Change 1.1 TITLE TITLE 1.2 NAME KING, THERESA NAME 1.3 STREET ADDRESS **3607 SW 12TH COURT** STREET ADDRESS 1.4 CITY-ST-ZIP FT. LAUDERDALE FL 33312 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE **OTV** 2.2 NAME NAME KING, KENNETH 2.3 STREET ADDRESS **3607 SW 12TH COURT** STREET ADDRESS 2. 4 CITY-ST-ZIP FT. LAUDERDALE FL 33312 CITY-ST-ZIP Change ☐ Addition M DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition .. DELETE TITLE 62 NAME NAME

6.3 STREET ADDRESS

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 supplied ental 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, of or an attachment with an address, with all other like empowered.

es 4/4.99 587-838

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90287 011 ***150.00