PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P95000077746

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90001 034 ***150.00

	NADSWORTH, IN	IC.												
Principal P ace of Business Mailing Address]						
5308 88TH ST. E. 5308 88TH ST. E. BRADENTON FL 34202 BRADENTON FL 34202														
BRADENTON FL 34202 BRADENTON FL 34202 US US								DO NOT WRITE IN THIS SPACE						
			•						corporated or Qualife	d		_		
									/1995			٦.		
2. Principal Place of Business			2a. Mailing Address					4. FEI Number				Applied For Not Applicable		
Suite. Act. #. etc.			26 Cuita Ant # ata			· · · · · · · · · · · · · · · · · · ·		65-0610653			C Q		dditional	
_	#, etc.		Suite, Apt. #, etc.					5. Certifos	nte of Status Desired		-	ee Re⊲	1	
City & State			City & State					6 Electica	n Campaign Financing				/lay Be	
23	C		28					i	und Contribution			dded tr	*	
Zip	Court	try	Zip	Cou	ntry				rporation owes the cu	rrent year	Intangible	,		
24	25	•	29	30			Personal Property Tax.			X Ye				
	9. Name and Add	ess of Current E						10. Name	and Address of New	Register	d Agent			
					81	Name								
	SWORTH, MELISSA	A			82	Street A	Addre	ss (P.O. Bo)	Number is Not Accep	table)				
5308 88TH ST. E.									· .					
BRAL	DENTON FL 34202				83									
					84	City					85	Zip C	ode	
			and 607.1508, Florida Statu								·L∣ ∣			
office c r re agent. ai	egistered agent, or bot m familiar with, and ac Signature, typed or printed na	cept the obligatio	nd title if applicable. (NO	orida Stati	utes.			when reinstating)		DATE				
12.		OFFICERS AND		13.					NS/CHANGES TO C	FFICERS	AND DIR	ECTO	₹S IN 12	
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NAME				1		ADDRESS								

CITY-ST-ZIP 14. I herebi/ 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 recluired by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if shanged or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRE S

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #