

1999.

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90005 011 ***150.00

AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000086480

1. Corporation Name

FLORIDA'S ST. PETE'S FINEST, INC.

Principal Place of Business
 1300 FIRST AVENUE NORTH
 ST. PETERSBURG FL 33705

Mailing Address
 1300 FIRST AVENUE NORTH
 ST. PETERSBURG FL 33705

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

11/09/1995

4. FEI Number

65-0635003

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional -

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes the current year Intangible Personal Property.

☐

Yes

☒

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 KATY CONNOR-DUBINA
 ST. PETERSBURG POLICE

27 City & State

1300 FIRST AV. N.

28 ST. PETERSBURG, FL

29 Zip

33705

30 Country

PINELLAS

8. Name and Address of Current Registered Agent

BROSS, JOSEPH
 1300 FIRST AVENUE NORTH
 ST. PETERSBURG FL 33705

10. Name and Address of New Registered Agent

81 Name
 CONNOR-DUBINA, KATY

82 Street Address (P.O. Box Number if not applicable)
 ST. PETERSBURG POLICE
 1300 FIRST AV. N.

83 City & State
 ST. PETERSBURG, FL

84 Zip

7/5/99

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.

JOSEPH F. BROSS, TREASURER

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

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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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/99 (727) 893-7551

Date

Daytime Phone #

CR2E034 (5/99)