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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000095650 1. Corporation Name

FILED Jan 21, 1999 8:00am **Secretary of State** 01-21-1999 90050 043 ***150.00

UNBEH	AGEN, INC.						
Principal Plac	ce of Business	Mailing Address		<u> </u>		8151 88 115 88 15 0 18181 8 115 0	OLIMI Bilist Bast 1061
45 WEST TARPON AVENUE 45 WEST TARPON AVENUE							
TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689			9		50 1107 117	ITC (1) TING OF LOC	
,						ITE IN THIS SPACE	
					3. Date Incorporated or Qualifed		
2 Principal (Place of Business	2a. Mailing Address			12/19/1995 4. FEI Number		A
⊢ −- '	Place of Business	— ·			59-3349246	- 	Applied For
Suite, Apt	# etc	Suite, Apt. #, etc.			39-3349240		Not Applicable 5 Additional
22	 , 	27			5. Certifcate of Status Desired	1 1 7	Required
City & Sta	ute	City & State	_=~-		6 Floation Compaign Financing		00 May Be
23		28			6. Election Campaign Financing Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country	,	8. This corporation owes the curr		
24	25	29	30		Personal Property Tax.	Yes	XNo
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New	Registered Agent	
1 18.11	BEHAGEN, ROGER J	5,10,7,5,5	81	Name			
UN545)	WEST TARPON AVENUE	,	82	Street Addre	ess (P.O. Box Number is Not Accept	able)	···
	RPON SPRINGS FL 34689		83		1 (1) 18		
						Long to See Calle	
			84	City		FL [T]	ip Code
Ser Asimone in the	control to the total	4 445 PARTER 114 NO.	1 1	5			
11. Pürsuani	t to the provisions of Sections 607.050	02 and 607 1508, Florida Statutes	s, the above	i e-named corpo	ration submits this statement for the	purpose of changing	its registered
11. Pursuant office or agent 1	t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	02 and 607 1508, Florida Statutes of Florida. Such change was au ations of, Section 607.0505, Flori	s, the above thorized by da Statutes	i e-named corpo the corporation	oration submits this statement for the n's board of directors. I hereby acce	purpose of changing pt the appointment as	its registered registered
agent. 1 a	am familiar with, and accept the obliga	02 and 607:1508, Florida Statutes of Florida. Such change was au ations of, Section 607.0505, Flori	s, the above thorized by da Statutes	i e-named corpo the corporation	oration submits this statement for the n's board of directors. I hereby acce	purpose of changing pt the appointment as	its registered registered
agent. 1 a	am familiar with, and accept the obligation is signature, typed or printed name of registered age	ations of, Section 607.0505, Flori	da Statutes Registered Agen	•	when reinstating)	DATE	
signature	am familiar with, and accept the obligation of t	ations of, Section 607.0505, Flori int and title if applicable. (NOTE: F ND DIRECTORS	Registered Agen	•	when reinstating) Fig. 4.5%. ADDITIONS/CHANGES TO OF	DATE FICERS AND DIREC	TORS IN 12
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6.4 CITY-ST-ZIP 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 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: