May 08, 1999 8:00 am Secretary of State

05-08-1999 90020 023 ***150.00

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 # P95000097060

1. Corporation Name

TITLE

NAME

STREET ADDRESS

Suite, Apt. #, etc.	Principal Place 817 NE 28TH S BELLE GLADE	ST	Mailing Address 817 NE 28TH ST BELLE GLADE FL 3						
2. Principal Place of Business		-						IS SPACE	
2. Principal Place of Business 2a Maling Address 5. Certificate of Statute Positive 55-0633267 Not Applied For Statute Not Ap							,		
Suite, Apt. #, etc. Suite, Apt. #, etc.									
Sulle, Apt. #, etc. Sulle, Apt. #, etc.	2. Principal P	lace of Business	2a. Mailing Addres	s					
City & State	21		26				65-0633267		
Trust Fund Contribution Added to Fees	Suite, Apt.	27					5. Certifcate of Status Desired		
Zip Country Zip Country		City & State City & State							
9, Name and Address of Current Registered Agent 10, Name and Address of Now Registered Agent		Country		Cor	intry	,	8. This corporation owes the current year	ntangible	
### STREET ADDRESS Name and Address of New Registered Agent 10. Name and New Address 10. Name and New Add	24	25	29	30			Personal Property Tax.	Yes	□No
MILLER, RICHARD F 817 NE 28TH ST BELLE GLADE FL 33430 84 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 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, 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 accept the obligations of, Section 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent with, and accept the obligations of, Section 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agen					\Box		10. Name and Address of New Registere	d Agent	
817 NE 28TH ST BELLE GLADE FL 33430 82 STREET AGGRESS (P.O. BOX NUTTURE IS NOT ACCEPTABLE) 83 84 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or manual 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 this if spokes the corporation's board of directors. I hereby accept the appointment as registered agent and this if spokes the corporation's board of directors. I hereby accept the appointment as registered agent agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. NAME 12. NAME 13. STREET ADDRESS 14. CITY-ST-2P 12. OFFICERS AND DIRECTORS IN 12 13. STREET ADDRESS 14. CITY-ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. NAME 16. CITY-ST-2P 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. NAME 10. Change Addition 10					81	Name			
BELLE GLADE FL 33430 83 64 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. 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, 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, the above-named 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, the above-named corporation submits this statement for the purpose of changing its registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or any accept the appointment as registered agent, agent a	MILLER, RICHARD F				02	Stroot Adde	rass (P.O. Box Number is Not Acceptable)		
### City ###	817 NE 28TH ST				OZ.	Sileer Add:	ess (F.O. BOX Number is NOT Acceptable)		
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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, are both, in the State of Florida. Statutes. SIGNATURE Signature Po	BELLE GLADE FL 33430				83		<u> </u>		
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Agent. I am familiar with, and accept the doligations of, Section 607-0505, Plottod statutes. SIGNATURE Signature, bysed or printed name of registered agent and the it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD DELETE 1.1 TITLE NAME MILLER, RICHARD F 1.3 STREET ADDRESS CITY-ST-ZPP BELLE GLADE FL 33430 1.4 CITY-ST-ZPP TITLE DELETE 3.1 TITLE DELETE 4.1 TITLE DELETE 4.1 TITLE DELETE 4.1 TITLE Addition Addition Addition Addition Change Addition Addition Addition Addition Addition Change Addition Addition Addition Change Addition Addition Addition Change Addition Addition Change Addition Addition Addition Change Addition Change Addition Addition Change Addition Addition Addition Change Addition Change Addition Addition Addition Change Addition Addition Addition Change Addition Change Addition Addition Change Addition Change Addition Change Addition Change Addition					84	City	F	L 85 ZIP C	ode
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	CITY-ST-ZIP			5.4 0	TY-S	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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

SIGNATURE:

561-996-0003

☐ Change

☐ Addition