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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000098009 1. Corporation Name

PAGEMAKERS, INC.

FILED Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90031 037 ***150.00



8 FERRIS DR		AAN EEDDIC DD				
B FERRIS ON		418 FERRIS DR PORT CHARLOTTE FL 33952		DO NOT WRITE IN	THIS SPACE	
ORT CHARLOTTE	E FL 33992			3. Date incorporated or Qualifed		
				12/22/1995		
•				4. FEI Number	Applied	For
Dringinal Plac	ce of Business	2a. Mailing Address		65-06309 <u>80</u>	Not Ap	Plicable
	30 01 200	26			\$8.75 Addit	tional
Suite, Apt. #,	etc	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Requir	
– 1		27		Flooring	\$5.00 May	v Be
City & State	<u></u>	City & State		6. Election Campaign Financing	Added to Fe	
_	•	28		Trust Fund Contribution 8. This corporation owes the current ye	ar Intangible	
3	Country	1 ZiP	Country	Personal Property Tax.	☐ Yes ☐	No
Zip	25	29 30		10. Name and Address of New Regist	tered Agent	
<u>4]</u>	9. Name and Address of Current	Registered Agent		10. Name and Address of Not 100		
	TO SECURE	1 127 CAL 707	81 Name		<u></u>	
RUST	IGE, JAMES	•	82 Street Ac	ddress (P.O. Box Number is Not Acceptable)		\
PAG418 F	FRRIS DR				Cherry Carlot (Aller et al. 1881)	
PUBT	CHARLOTTE FL 33952		83	经验证证证据的证据的		接接指導
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		* 1	84 City		FL	
		- TATAL POLITICAL Statutes	he above-named co	orporation submits this statement for the purp ration's board of directors. I hereby accept the	ose of changing its reg	gistered tered
11. Pursuant to	o the provisions of Sections 607.050	of Florida: Such change was author	rized by the corpor	orporation submits this statement for the purp ration's board of directors. I hereby accept the	appointment do 1991	
office or re	gistered agent, or both, in the State in familiar with, and accept the obliga	tions of, Section 607.0505, Florida	Statutes.		•.	
			t A A simpoture (or		DATE	
SIGNATURE	Signature, typed or printed name of registered age	ik alko ueo ii oppiiiani	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	S IN 12
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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 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 is 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 are 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 are 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 are information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes: I further certify material in information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes: I further certify material in information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes: I further certify in the information stated in Section 119.07(3)(ii). Florida Statutes: I further certify in the information stated in Section 119.07(3)(ii). Florida Statutes: I further certify in the information stated in Section 119.07(3)(ii).

SIGNATURE: