03-10-1999 90184 008 ***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 # P96000029834

1. Corporation Name

S AND L OF VERO BEACH, INC.

O AND E	OF VEHO DENOTH INC.							
Principal Place	of Business	Mailing Address						
2199 - 7TH AVE VERO BEACH F	2199 - 7TH AVE. VERO BEACH FL 32960			DO NOT WRITE IN TH	IS SPACE			
					3. Date Incorporated or Qualifed 04/02/1996	O OF AGE		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0681737	<u> </u>	plied For t Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional		
City & State	8	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	· .	
Zip	Country 25		Country		This corporation owes the current year I Personal Property Tax.	X Yes	□No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent		
			81	Name				
silver, dennis 2199 - 7th ave.			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
VER	O BEACH FL 32960		83					
			84	City	F	85 Zip (Code	
SIGNATURE	Signature, typed or printed name of registered as		ered Age	nt signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	DRS IN 12	
TITLE	PVD		1 TITLE			☐ Change	Addition	
NAME	SILVER, DENNIS	1	.2 NAME					
STREET ADDRESS	2199 - 7TH AVE.			TADDRESS				
CITY-ST-ZIP	VERO BEACH FL 32960		4 CITY-S	ST-ZIP		Change	Addition	
TITLE NAME	STD Silver, Patricia		2 NAME				_	
STREET ADDRESS	2199 - 7TH AVE.	2	3 STREE	T ADDRESS	~			
CITY-ST-ZIP	VERO BEACH FL 32960			ST-ZIP		Change	Addition	
TITLE NAME			.1 TITLE			Change		
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			.4. CITY-	ST-ZIP				
TITLE		☐ DELETE 4	.1 TITLE			☐ Change	☐ Addition }	
NAME			, 2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			4 CITY-S	s)-ZIP		Change	Addition	
TITLE NAME			.2 NAME			_ ,	_	
STREET ADDRESS			.3 STREE	TADDRESS			ĺ	
CITY-ST-ZIP		[5	6.4 CITY-5	ST-ZIP				
TITLE		Dece.,c	1 TITLE			☐ Change	☐ Addition	
NAME		. €	2 NAME					

6.4 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 charped, or on an attachment with an address, with all other like empowered.

6 3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

Devnis Silven

561-569-4075