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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000036909**1. Corporation Name

MEYER, BONGIRNO & CRAIG, INC.

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90029 046 ***150.00



•									
Principal Place of Business		Mailing Address							
130 S PARK AVE		130 S PARK AVE			·				
WINTER PARK FL 32789		WINTER PARK FL 32789			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed		,	
						04/29/1996			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				<u>59-3381536</u>			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A	
22		27				<u> </u>	<u> </u>	Fee Re	
City & State	e	City & State				6. Election Campaign Financing		\$5.00 Added t	7
23	0	28	Cour	ntr.		Trust Fund Contribution	ont vent Into		0 1 663
Zip	Country	Zip	30	iu y		 This corporation owes the curr Personal Property Tax. 	ent year ma	angible , ☐Yes ✓	NO
24	9. Name and Address of Curren	29 29 Agent	130]		 '-	10. Name and Address of New F	Registered A	Agent	-
	9. Name and Address of Curren	it registered Agent		81 1	Name				
MEY	er, gregory a			92 (Chunch Add	dress (P.O. Box Number is Not Accepta	able)	 .	
130	S PARK AVE			82 3	Street Auc	Procedure of the company of the comp	able)	Same of the same	
WIN	TER PARK FL 32789		1	83			1		
				84 (City	8 9 9 9 9 9		85 "Zip (ode
				04	City		<u>FL</u>		
4.5									
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida, Such change was a	autnonzed	DV IN	named cor e corporal	poration submits this statement for the tion's board of directors. I hereby accept	purpose of ot the appoir	ntment as re	gistered
office or r	egistered agent or both in the State	of Florida. Such change was ations of, Section 607.0505, Fl	autnorized orida Statu	ites.	e corporai	red when reinstating)	DATE	Tente do 10	· .
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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.

407.628.1982