PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPART Katherin Secretary DIVISION OF CO	e Harris of State	FILED Feb 16, 1999 8:00am Secretary of State 02-16-1999 90012 023 ****150.00	
DCUMENT # P96000	0039283			
live oyl, inc.				
cipal Place of Business	Mailing Address 325 WEST SHORE PLAZA			
MAGDALENE GROVE AVENUE PA FL 33613-2024	TAMPA FL 33609		DO NOT WRITE IN THI	IS SPACE
	US		3. Date Incorporated or Qualifed	
			05/06/1996	Applied For
Principal Place of Business	2a. Mailing Address		4. FEI Number 59-3380950	Not Applicable
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
	27			Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year	Intangible □Yes □No
25		30	Personal Property Tax. 10. Name and Address of New Registere	
9. Name and Address of Curr	ent Registered Agent	81 Name		·
CAMPBELL, THOMAS G	-	82 Street Add	ress (P.O. Box Number is Not Acceptable)	<u> </u>
1221 MAGDALENE GROVE AVENU TAMPA FL 33613-2024		83		
TANFA FL 33013-2024				그는 이 방어 변경 전쟁을 하세요.
· •				85 Zin Code
Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statute te of Florida. Such change was a ications of Section 607.0505, Flor	84 City as, the above-named corr ithorized by the corporati ida Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its registered
Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli SNATURE Signature, typed or printed name of registered a OFFICERS	agent and tille if applicable. (NOTE: AND DIRECTORS	es, the above-named corporation in the corporation of the corporation	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap red when reinstating)	of changing its registered pointment as registered
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