## 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 # P96000044861

1. Corporation Name

HOW NICE, INC.

TITLE

NAME

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90071 005 \*\*\*150.00



,								
Principal Place	of Business	Mailing A	ddress				1 19119 91191 1191 1991	
828 LARK ST 828 LARK ST								
FT WALTON BEACH FL 32547 FT WALTON BEACH FL 32547								
US US						DO NOT WRITE IN THIS SPACE		
		ت معادرات			- سوما	3. Date Incorporated or Qualified 05/22/1996		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For		
21					59-3388599	Not Applicable		
			Apt. #, etc.			E Cortifonto of Status Desired	75 Additional ee Required	
			y & State			6. Election Campaign Financing S5.00 May Bo		
23	28					Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Zip Cou			8. This corporation owes the current year Intangible	8. This corporation owes the current year Intangible	
24	25 29 30				Personal Property Tax.			
24)	9. Name and Address of Curren	1=1		<u>, I</u>		10. Name and Address of New Registered Agent		
				81	Name			
MATTHEWS, DANA C				ما ا				
607 HWY 98 E				82	Street Add	dress (P.O. Box Number is Not Acceptable)	1	
DESTIN FL 32541				83				
				84	City	FL 85	Zip Code	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida, Suc	th change was author	orizea ov	the corporat	poration submits this statement for the purpose of changlition's board of directors. I hereby accept the appointment	ng its registered as registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applical	NOTE: Rev	nistanad Ager	nt signature (Adulr	red when reinstating) DATE		
12.	OFFICERS AN			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRI	CTORS IN 12	
TITLE	P		☐ DELETE	1.1 TITLE			ange 🗀 Addition	
NAME	GILL, R. GEORGE			1.2 NAME	- 1		<b>\</b>	
STREET ADDRESS	ACC LADIC OT			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	ET WALTON BEOUT OF 20547			1.4 CITY-S	T-ZIP			
TITLE				2.1 TITLE	"	☐ Ch	ange	
NAME				2.2 NAME				
'STREET ADDRESS	الوالمسترات المسترات المستورات المستورات المستورات		-	2.3 STREE	TADDRESS	الربها فالمعالم التالي المسريدات	- ,	
CITY-ST-ZIP				2.4 CITY-5	ST-ZIP			
TITLE			☐ DELETE	3.1 TITLE		□ Ch	ange Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREE	TADDRESS			
000/ 07 7/D				34 CITY-9	T-7IP		ì	

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 changed, or on an attachment with an address, with all other like empowered. CITY-ST-ZIP

4.1 TITLE

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TTILE

6.2 NAME

4. 2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 C(TY-ST-ZIP

6.3 STREET ADDRESS

☐ DELETE

☐ DELETE

☐ DELETE

SIGNATURE:

Change

☐ Change

☐ Change

☐ Addition

Addition

Addition