PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000054274

FILED Mar 10, 1999 8:00 am Secretary of State

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Principal Place	e of Business	Mailing Address			1,1881	i Ber i ve verre Evita merri mer	i dater anrar a	itit Ataca cia	(i itti titi titi
1825 SUNSET PT. ROAD CLEARWATER FL 34625 CLEARWATER FL 34625						DO NOT WRIT	E IN THIS	SPACE	
						rporated or Qualifed	<u> </u>	JI AUL	
					06/24/1		 	<u> </u>	
2. Principal Place of Business		2a. Mailing Address			4. FEI Numb	· ·		⊢	Applied For
21		26			52-198	5032			Not Applicable Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Certifcate	of Status Desired		•	Required (
City & State		27 City & State			e Élection (Campaign Financing		\$5 N	0 May Be
		28			1	d Contribution			d to Fees
Zip	Country	Zip	Country	 _		oration owes the curre	ent year Inta	ngible	}
24	25	<u> </u>	30			Property Tax.	•	∐ Yes	□No}
24	9. Name and Address of Curre				10. Name an	d Address of New R	egistered /	gent	
····		<u></u>	81	Name	<u> </u>		•		
	TARAS, K D 5 PARK DRIVE STE 3		82		dress (P.O. Box N	umber is Not Accepta	ble)		
CLE	ARWATER FL 34623		83	,	<u> </u>				
			84	City			FL	85 Zi	Code .
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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 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR