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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000058663

1. Corporation Name

PISCES	PROPERTIES, INC.						
Principal Place	e of Business	Mailing Address			1 (30)(20) (15 (2)) 2 (1) 50(4) 40(4) 40(4)	BE(E) 6(181 (3149 61410)	#51 ## \$161 1 # #1
333 17TH STREET 333 17TH STREET					1		
STE V					DO NOT WRITE IN THIS SPACE		
VERO BEACH FL 32960 VERO BEACH FL 32960					3. Date Incorporated or Qualifed	THO OF AGE	
					07/11/1996		{
2 Principal P	face of Business	2a. Mailing Address			4. FEI Number	Apı	plied For
21	26				65-0681039	No:	t Applicable
	Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	
22					5. Certificate of Ottotal Desired	Fee Re	
City & State City & State					6. Election Campaign Financing	\$5.00	- 1
23		28	Carrata		Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country	Y	 This corporation owes the current year Personal Property Tax. 		□No
24	9. Name and Address of Curr		30		10. Name and Address of New Registe		
	9. Haille and Address of Out	ent registerou regont	81	Name	10,		
MCHUGH, JOHN J JR.				0 11	(D.O. D. N. Harris Mat Assertable)		
333 17TH STREET			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
STE V			83	1		, LL 10-1-	
VERO BEACH FL 32960			-			ne Zin (Sada .
			84	City		FL 85 Zip C	2008
agent. I a SIGNATURE	m familiar with, and accept the obl	gations of, Section 607.0505, Flori	ida Statute:	S. ont signature require	on's board of directors. I hereby accept the a d when reinstating) ADDITIONS/CHANGES TO OFFICER	TE	
12.	D	DELETE	1.1 TITLE		ADDITIONO/OFFICE TO OF FIGER	☐ Change	Addition
NAME	Bramlett, Martha L		1.2 NAME				
STREET ADDRESS	333 17TH STREET VERO BEACH FL 32960		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		•		
CITY-ST-ZIP							
TITLE			2.1 TITLE			Change	☐ Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS			
CITY-ST-ZIP			2.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		•	☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP		[] printe	3.4. CITY-	ST-ZIP		☐ Change	☐ Addition
TITLE		☐ DELÉTE	4.1 TITLE			☐ Citalige	
NAME			4. 2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	51-ZIP		☐ Change	Addition
TITLE			5.2 NAME			3-	
NAME STREET ADDRESS				ET ADDRESS	-	4	į
CITY-ST-ZIP			5.4 CITY-				Ì
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
			6.3 STREE	T ADDRESS			

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.

6.4 CITY-ST-ZIP

SIGNATURE:

Daytime Phone #