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 # 1. Corporation Name

Florida Island Fontasy Inc

P 96000065150 Rusiness Mailing Address

Principal Place of Business

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90123 004 ***150.00



	B-eeze FL 32561	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 8/05/76								
2. Principal Place of Business 2a. Mailing Address 26 5CC /				bore		4. FEI Number 75 - 266256	7	<u>-</u>	plied For Applicable	
21 Suite Ant	# otc	26 See // 0 Suite, Apt. #, etc.					<u>*</u>	\$8.75		
Suite, Apt.	m, 010.	27			5. Certificate of Status Desired	1	Fee Re			
- City & State	е	City & State				6. Election Campaign Financing Trust Fund Contribution That St.00 May Be Added to Fees				
Zip 24	Country 25	Zip 29	30	Country	·	8. This corporation owes the curren Personal Property Tax.		Yes	□No	
	9. Name and Address of Current	Registered Ag	jent		т	10. Name and Address of New Reg	jister⊴d A	gent		
Teresa Osborne PO Box 1738					81 Name 82 Street Address (P.O. Box Number is Not Acceptable)					
Ke	y Lest F	· 3	3041	84	City		FL	85 Zip (Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE										
	Signature, typed or printed name of registered agent a		(NOTE: Re	gistered Age	nt signature req irred	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12	
12.	OFFICERS AND		DELETE	1,1 TITLE				Change	Addition	
TITLE NAME	PSTD			1.2 NAME						
STREET ADDRESS	POBOX 1738	J304	,	·	T ADORESS				_ {	
TITLE	They was to pe	<u> </u>	DELETE	2.1 TITLE	,			[*] Change	Addition	
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STREET ADDRESS	PU BOY 1738	_		2.3 STREE	TAODRESS				}	
CITY-ST-ZIP	PO BOX 1738 I KEY WEST FL	3304	/	2.4 CITY-5	ST-ZIP			[:10]	Addition	
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NAME				32 NAME		•				
STREET ADDRESS					TADDRESS					
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NAME.			•	6 2 NAME	T ADDRESS					
STREET ADDRESS					T ADDRESS					
				6.4 CITY-S	G-ZP L					

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. Flurther 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 open attachment with an address, with all other like empowered.

SIGNATURE: