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 # **P96000066722**1. Corporation Name

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90030 014 ***150.00

GETAWA	AY MOBILITY PHODUCTS, I	ING.							
Principal Plac	e of Business	Mailing Address	•			I IBBICEBL SIG IDITE GITTS BRITT BRITT BRITT BRITT	9 714 9 9 1171 1 9	814 (1819 III) (189)	
212 HIGHWAY 301 BLVD. EAST 212 HIGHWAY 301 BLVD. EA BRADENTON FL 34208 BRADENTON FL 34208									
						DO NOT WRITE IN THIS	SPACE		
						3. Date Incorporated or Qualifed			
						08/07/1996		ļ	
Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For	
21 26			_			65-0688900		Not Applicable	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				<u>_</u>	\$8.75 Additional		
22	,	27				5. Certificate of Status Desired	Fee	Required	
City & Sta	te	City & State	·			6: Election Campaign Financing	\$5.0	0 May Be	
23		28			•	Trust Fund Contribution	Adde	ed to Fees	
Zip	Country	Zip	Co	untry		8. This corporation owes the current year In	tangible		
24	25	29	30			Personal Property Tax.	Yes	□No	
	9. Name and Address of Curre	nt Registered Agent		Ί		10. Name and Address of New Registered	Agent	·	
				81	Name				
MACKEY, PETER J ESQ.				82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
	14TH STREET WEST			"	Jugarna	areas (r.o. box rumos) is many isospinos)			
BRA	DENTON FL 34205			83					
	•			_			05 7	ip Code	
				84	City	FL	_ 85 Z	ib Code	
12.	Signature, typed or printed name of registered ag	ent and title if applicable. (NO ND DIRECTORS	TE: Register		nt signature requ	ADDITIONS/CHANGES TO OFFICERS A			
TITLE	D	☐ DELETE	1.1	TITLE			☐ Chan	ge Addition	
NAME	PIONTEK, SUSAN		1.2	NAME					
STREET ADDRESS	ALA LUCIONALY CON DILID EN	ST	1.3	STREET	TADDRESS				
CITY-ST-ZIP	BRADENTON FL 34208		1.4	сту-ѕ	T-ZIP	•			
TITLE		☐ DELETE	2.1	TITLE			☐ Chan	ge 🔲 Addition	
NAME)		2.2	NAME	1			•	
STREET ADDRESS			2.3	STREE	TADDRESS				
CITY-ST-ZIP			2.4	CITY-8	ST-ZIP				
TITLE		☐ DELETE	3.1	TITLE			Chan	ge	
NAME			. 3.2	NAME		م التي ومناه المجال المراد المالية المالية المناها المنطق المنطقة المنطقة المنطقة المنطقة المنطقة المنطقة المنطقة		•	
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NAME	1		4. 2	NAME	j	••			
STREET ADDRESS			4.3	STREE	TADDRESS				
CITY-ST-ZIP			4,4	CITY-S	T-ZIP				
TITLE		DELETE	5.1	TITLE		•	Chan	ge	
NAME			5.2	NAME	İ				
STREET ADDRESS	8		5.3	STREE	T ADDRESS				
CITY-ST-ZIP	1		5.4	спу-\$	T-ZIP				
TITLE	·	☐ DELETE	6.1	TITLE			☐ Chan	ge Addition	
NAME			6.2	NAME					
STREET ADDRESS	3				T ADDRESS				

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 en an alternation with an address, with all other like empowered.

SIGNATURE: