**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # PORNONARRAAN

1. Corporation VENTURI	ES UNLIMITED, INC.	)000 <del>1</del> 0						
Principal Place of Business Mailing Address						t 105(105) No 10(5 Bill) Solly		
B103 ASH COURT 3103 ASH COURT								
PALM HARBOR FL 34683		PALM HARBOR FL 34683				DO NOT WRITE IN THIS SPACE		
					-		IN THIS SPACE	
						3. Date Incorporated or Qualifed		
-1-					$\rightarrow$	08/15/1996 4. FEI Number	·;	Applied For
2. Principal Pl	ace of Business	2a. Mailing Address	ı				<del></del>	Not Applicable
1]		26 Suite Ant # at				65-0689805		Additional
Suite, Apt. #	Ŧ, etc.	Suite, Apt. #, etc	<i>i</i> .			5. Certifcate of Status Desired [	7	Required
2		City & State				5. Fleetier Compaign Financing		0 May Be
City & State		28				<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>		to Fees
Zip	Country	Zip	Co	ountry		8. This corporation owes the curren		
<b>–</b>		29	30	,		Personal Property Tax.	Yes	₩o
24	9. Name and Address of Current			Т	1	0. Name and Address of New Reg	gistered Agent	
PINTO, CHERYL A 3103 ASH COURT PALM HARBOR FL 34683				83 84 City P	Address 08	(P.O. Box Number is Not Acceptable ST. St	FL 85 Zip	o Code
SIGNATURE	<b></b>	バnto	- $        -$	ambi	Je 1	an gringo	4/1/4	registered
	Signature, typed or printed name of registered agent			ed Agent signature re	equifed wh	en reinstating) ADDITIONS/CHANGES TO OFFIC	DATE /	TOPS IN 12
12.	OFFICERS AND	DIRECTORS	13 TE 11	TITLE	00	cretary transite		
TITLE .	PINITO VENTURA A	(_) DELL		NAME	200	unbi Jean Pinto	. <u></u>	
NAMÉ	PINTO, VENTURA A				į σ	BI 45th OT		
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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 exact 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 a state of the corporation.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90096 028 \*\*\*150.00