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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 29, 1999 8:00am **Secretary of State**

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GRACIOUS LADY ESCORT SERVICE, INC.

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|--|---|---|-------------------------------|--|--|--|--|--|
| Principal Plac | ce of Business | Mailing Address | | | | | ii ta aa i a iika atiis imi | |
| 710 SOUTH MAIN 710 SOUTH MAIN | | | | | | · | | |
| AUBURNDALE FL 33823 AUBURNDALE FL 33823 | | | | | | | | |
| | | , | | | | DO NOT WRITE IN TH | IS SPACE | |
| | | • | | | | 3. Date Incorporated or Qualifed 09/09/1996 | | |
| 2. Principal F | Place of Business | 2a. Mailing Addre | ess | | | 4. FEI Number | Appli | ied For |
| 21 | ************************************** | 26 | | | | 59-3400799 | Not A | Applicable |
| Suite, Apt. | : #, etc. | Suite, Apt. #, | etc. | | | E Continue of Status Desired III | \$8.75 Ad | ditional |
| 22 · | | 27 | | | | 5. Certificate of Status Desired | Fee Requ | |
| City & Sta | te | City & State | | *** | | 6. Election Campaign Financing | \$5.00 M | lav Be |
| 23 | | 28 | | | | Trust Fund Contribution | Added to | Fees |
| Zip | Country | Zip | | Country | | 8. This corporation owes the current year I | ntangible | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax. | ☐ Yes ☐ | No |
| | 9. Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New Registere | d Agent | |
| MAC | RRAMORE, PATRICIA | the second of the second | | 81 | Name | | | |
| | SOUTH MAIN | | | 82 | Street Ad | Idress (P.O. Box Number is Not Acceptable) | | $\overline{\cdot}$ |
| | BURNDALE FL 33823 | | | | | the supplication of the su | 12 by december (A) | 41 - 7141 1307 |
| , 700 | JOHN JOHLE I E 33023 | • | • | 83 | | | (福間間 | |
| | | | | 84 | City | 5 (5) (5) (5) (5) (5) (5) (4) (5) (5 | 85 Zip Co | de |
| 11 Dureupst | to the provisions of Sections 607.050 | 2 and 607 1508 Florid | la Statutas H | bo obove | named co | Progration submits this statement for the purpose of | t changing its re | nictored |
| office or agent. I a | registered agent, or both, in the State am familiar with, and accept the obligation | of Florida. Such chang tions of, Section 607.0 | je was authoi 505, Florida | rized by Statutes. | the corpora | orporation submits this statement for the purpose of ation's board of directors. I hereby accept the app | ointment as regis | stered |
| SIGNATURE | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| 12. | Signature, typed or printed name of registered agen | | | stered Ageni | t signature requ | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECTOR | Q INL 12 |
| TITLE | D OFFICERS AN | D DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFICERS A | AND DIKECTOR | O IN IZ |
| DILE | | 1 I DE | IFTE . | 4 4 T/T) E | | 13547 | ["] Change | Γ' Addition |
| NAME | ₹' | L D€ | · · | 1.1 TITLE | | 3550000 · · · · · · · · · · · · · · · · · | Change | Addition |
| NAME | NARRAMORE, PATRICIA | L DE | | 1.2 NAME | | 13660.84 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Change | Addition |
| STREET ADDRESS | NARRAMORE, PATRICIA 710 SOUTH MAIN | LJ DE | | 1.2 NAME 1.3 STREET | | 35650.84 | Change | Addition |
| STREET ADDRESS CITY-ST-ZIP | NARRAMORE, PATRICIA | | | 1.2 NAME 1.3 STREET 1.4 CITY-ST | | 35650.82 | | |
| STREET ADDRESS CITY-ST-ZIP TITLE | NARRAMORE, PATRICIA 710 SOUTH MAIN | □ DE | LETE | 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE | | 13/5/5/(A) 1 | Change | Addition Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME | NARRAMORE, PATRICIA 710 SOUTH MAIN | | LETE | 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME | -ZiP | 13550 (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B | | |
| STREET ADDRESS CITY-ST-ZIP TITLE | NARRAMORE, PATRICIA 710 SOUTH MAIN | | LETE | 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET | -ZIP ADORESS | | | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | NARRAMORE, PATRICIA 710 SOUTH MAIN | □ DE | LETE | 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-ST | -ZIP ADORESS | | ☐ Change | Addition |
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indicated on this annual report or supplied with this filling does not equility for the exemption stated in Section 119-07(3)(), Florida Statutes. Further cetting 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:

