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 FRANK HOMES INVESTMENTS,				
Principal Place of Business	Mailing Address			
10785 ULMERTON ROAD LARGO FL 33778	10785 ULMERTON ROAD LARGO FL 33778			
		3.		
2. Principal Place of Business	2a. Mailing Address	4.		
21	Suite, Apt. #, etc.			
Suite, Apt. #, etc.	27	5.		
City & State	City & State	6.		
123	28			
Zip Country	Zip Country	8.		
24 25	29 30	10.		

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

02-19-1999 90127 014 ***150.00



						\114 BRILL GRESS BRISS .	*******		
Principal Place	of Business	Mailing Address			}				
0785 ULMERTO	ON ROAD	10785 ULMERTON ROAD			•				
ARGO FL 33778		LARGO FL 33778			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qua		<u> </u>		
					09/16/1996				
a Dringing Of	ace of Business	2a. Mailing Address			4. FEI Number		Ar	plied For	
z. Principai Pi	duce of Business	26			65-0695510		No	t Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.			1	ed 🗍	\$8.75		
¬	<i>m</i> , 610.	27			5. Certifcate of Status Desir	<i>5</i> 0 🗆	Fee Re	equired	
2 City & State	Δ	City & State			6. Election Campaign Financing \$5.00 May Be				
3	•	28			- Trust Fund Contribution	<u>_</u>	Added	to Fees	
Zip	Country	Zip	Countr	у	8. This corporation owes the	current year int			
4	25	29 3	10		Personal Property Tax.		☐ Yes	□ No	
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of	lew Registered	Agent		
		······································	8.	Name					
	ASSEN, WILLIAM S		8:	Street Add	Iress (P.O. Box Number is Not A	ceptable)			
	5 ULMERTON ROAD				· · ·				
LAR	GO FL 33778		8:	3					
			84	4 City			85 Zip	Code	
	to the provisions of Sections 607.050			1 1		FL	_		
SIGNATURE	Signature, typed or printed name of registered age			ent signature requir	red when reinstating) ADDITIONS/CHANGES T	O OFFICERS A	ND DIRECT	ORS IN 12	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES I	O OFFICERS A	Change	☐ Addition	
TITLE	D	. DELETE					_		
NAME	FRANK, MATTHEW J		1.2 NAME						
STREET ADDRESS				ET ADDRESS	-				
CITY-ST-ZIP	LARGO FL 33778	☐ DELETE	1.4 CITY-				☐ Change	Addition	
TITLE			2.1 TITLE		•				
NAME	i		2.2 NAME	1	•				
STREET ADDRESS			li	ET ADDRESS					
CITY-ST-ZIP		☐ DELETE	2. 4 CITY 3.1 TITLE				Change	Addition	
TITLE		☐ DETEIE	4	ľ		,		÷ '	
NAME			3.2 NAM						
STREET ADDRESS	\$			ET ADDRESS	,				
CITY-ST-ZIP		☐ DELETE	3.4. CITY 4.1 TITLE				☐ Change	Addition	
TITLE			4.1 HILE				_		
NAME									
STREET ADDRESS	5			ET ADDRESS				•	
CITY-ST-ZIP		DELETE	4.4 CITY 5.1 TITU				☐ Change	☐ Addition	
TITLE			5.1 HTC	I .	•		·		
NAME				ET ADDRESS	•				
STREET ADDRESS	5		5.4 CITY	i					
CITY-ST-ZIP		☐ DELETE	6.1 TITL				☐ Change	Addition	
TITLE		□ pereie	6.2 NAM			•	. •		
NAME				EET ADDRESS	. •		•		
STREET ADDRESS	sl		0.3 S I K	LL ALKURESS					

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not quality 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 of 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 on an attachment with an address with all other like empowered. CITY-ST-ZIP

SIGNATURE:

Daytime Phone #