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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078920 (1)

BITS & TREASURE INCORPORATED

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Principal Place of Business 911 PARK AVENUE		"	Mailing Address						
911 PARK AVENUE LAKE PARK FL 33403			911 PARK AVENUE Lake Park FL 33403-2403						
						3. Date Incorporated or Qualified 09/23/1996	3a. Date of	Last Re	port
2. Principal P	lace of Business	28. Mailing Addre	0 S S			4. FEI Number		Ap	plied For
21		26				65-07040			Applicabl
Suite, Apt	#, etc.	Suite, Apt. #,	etc.			5. Certificate of Status Desired		B.75 A Fee Re	dditional outred
City & State	E;	City & State	····			6, Election Campaign Financing		5.00	
3		28				Trust Fund Contribution		Added k	
Zip	Country	Zip		Country		8. This corporation has liability for	intangible tax u	under s.	199.032,
24	25	29	30				Yes 🔀 No		
		Current Registered Agent	*******			10. Name and Address of New Re	egistered Agen	ıt	
	E, PHILIP W			81	Name				
	PARK AVNEUE		82		Street Address (P.O. Box Number is Not Acceptable)				
LAN	E PARK FL 33403			83	·				
				84	City		85	Zip C	òde
				1	•		FL	,	
agent lia	in familiar with, and accept the	ne obligations of Section 607.	0505. Florida	Statutes.	io corpora	poration submits this statement for the tion's board of directors. I hereby acce	pt the appoint		- ugioto o u
							DATE		
SIGNATURE.	Signature Typed or printed name of reg		(NOT€: Reç			red when reinstaling) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIR	ECTORS	S IN 12
SIGNATURE.	Signature Typed or printed name of reg	stered agent and title if applicable.	(NOTE: Reg	gistered Agent		red when reinstaling)	CERS AND DIR	ECTORS	
SIGNATURE. 12. TITLE	Signature typed or period name of leg OFFICE PD BATE, PHILIP W	estered agent and title it applicable. ERS AND DIRECTORS	(NOTE: Reg	gistered Agent 13.		red when reinstaling)	CERS AND DIR		
SIGNATURE. 12. TITLE NAME	PD BATE, PHILIP W 325 SUMMER CIRCLE	estered agont and title if applicable. ERS AND DIRECTORS 06	(NOTE: Reg	gistered Agent 13.	signature requi	red when reinstaling)	CERS AND DIR		
SIGNATURE. 12. TITLE NAME SIPEFT ADDRESS	OFFICE PD BATE, PHILIP W 325 SUMMER CIRCLE PALM BEACH GARDEN	estered agent and title if applicable. ERS AND DIRECTORS 0E	(NOTE: Reg	13. 1.1 TITLE 1.2 NAME	eignature requi	red when reinstaling)	CERS AND DIR	Change	Addition
SIGNATURE. 12. TITLE NAME SIPEFT ADDRESS CITY: ST-ZIP	PD BATE, PHILIP W 325 SUMMER CIRCLE PALM BEACH GARDEN VD	estered agont and title if applicable. ERS AND DIRECTORS 06	(NOTE: Reg	9 stered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET AC	eignature requi	red when reinstaling)	CERS AND DIR		Addition
SIGNATURE. 12. TILLE NAME SIPEFT ADDRESS CITY-ST-ZIP TITLE NAME	PD BATE, PHILIP W 325 SUMMER CIRCLE PALM BEACH GARDEN VD PENROSE, TAYLOR S	estered agent and title if applicable. ERS AND DIRECTORS 0E	(NOTE RES	ostered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET AC 1.4 CITY-ST- 2.1 TITLE 2.2 NAME	eignature requi	red when reinstaling)	CERS AND DIR	Change	Addition
SIGNATURE. 12. TILLE NAME SIPEFT ADDRESS CITY-ST-ZIP TITLE NAME SIPEET ADDRESS	PD BATE, PHILIP W 325 SUMMER CIRCLE PALM BEACH GARDEN VD PENROSE, TAYLOR S 6222 DANIA ST.	S FL 33410	(NOTE REC	9 stered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET AC 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET AC	eignature requi	red when reinstaling)	CERS AND DIR	Change	Addition
SIGNATURE. 11. 11ILE NAME SIPEFI ADDRESS CITY-ST-ZIP 11ILE NAME SIPEEI ADDRESS CITY-ST-ZIP	PD BATE, PHILIP W 325 SUMMER CIRCLE PALM BEACH GARDEN VD PENROSE, TAYLOR S 6222 DANIA ST. PALM BEACH GARDEN	S FL 33418	(NOTE REC	9 stered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET AC 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET AC 2.4 CITY-ST-	eignature requi	red when reinstaling)	CERS AND DIR	Change Change	Addition
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