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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000082150

1. Corporation Name

LICHT PROOF INC

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90039 014 ***150.00

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Principal Place	of Business	Mailing Address				I CHANGE OF THE CONTRACT CONTR	I ab iik Balak ki	11 juli 11 juli 11 juli 1	A MARIA MARA ROMA	
99 SOUTH PLUMOSA STREET		99 SOUTH PLUMOSA STREET			•	`				
MERRITT ISLAND FL 32952		MERRITT ISLAND FL 32952			DO NOT WOLL	E IN THIS I	CDACE			
						DO NOT WRIT	E IN THIS	SPACE		
						3. Date Incorporated or Qualifed				
		1 0 14-15- Address				10/01/1996 4. FEI Number		1 1 4	oplied For	
2. Principal Place of Business		2a. Mailing Address							ot Applicable	1
21		Suite Apt # etc			59-3403428			Additional	ĺ	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired			equired		
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be		
23	•	28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	Cou	untry		8. This corporation owes the curre	nt year Inta	ngible		ĺ
24	25	29	30			Personal Property Tax.		Yes	No _	
<u>1</u>	9. Name and Address of Current					10. Name and Address of New Re	gistered A	gent		ĺ
				81	Name				ľ	İ
o'connell, Kevin 99 South Plumosa Street				82	Street Addr	ress (P.O. Box Number is Not Acceptate				
				"	Oli Odi / Idai		,			
MER	RITT ISLAND FL 32952			83						
				84	City			85 Zip	Code	
				"	City		FL			
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office or n agent. I a SIGNATURE	opistored agent or both in the State o	f Florida. Such change was a ons of, Section 607.0505, Fk	authorize orida Stat	tutes.	ne corporation	on's board of directors, I hereby accept	DATE	iunen as i		10
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CITY-ST-ZIP 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 on an attachment with an address, with all other like empowered.

(407)454-255 SIGNATURE: 1)