Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90024 049 \*\*\*150.00

## 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 # P96000083009

1. Corporation Name

2. Principal Place of Business   2a. Mailling Address   4. FEI Number   Applied For 10/(88) 1996   17.   28	HUYAL	HYDER MUTUHCYCLE MA  . e of Business	Mailing Address	; ;						
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   10/08/1996   4. FEI Number   Applied For   4. FEI Number   59-3403742   5. Certificate of Status Desired   57-5 Additions   5									•	
2. Principal Place of Business   2s. Mailing Address   4. Fish Number   Applied for Sulfa, Apl. #, etc.   5p. 3403742   88.75 Additional February   5p. 3403742   5p. 3403742   88.75 Additional February   5p. 3403742   5p. 3403	HUDSON FL 34667 HUDSON FL 34667						DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 28 28 30 Sulle, Apt. #, etc. 27 Sulle, Apt. #, etc. 28 Sulle, Apt. #, etc. 27 Sulle, Apt. #, etc. 28 Sulle, Apt. #, etc. 28 Sulle, Apt. #, etc. 29 Sulle				•						
Sulfie, Apt. #, etc.    Sulfie, Apt. #, etc.			•				10/08/1996			_
Sulte, Apt. #, etc.    Sulte, Apt. #, etc.	2. Principal P	lace of Business	2a. Mailing Address						<u> </u>	_
City & State	21						59-3403742			$\overline{}$
City & State    City & State   City & City & State   City & State	<del></del>	#, etc.					5. Certificate of Status Desired			
Added to Fees   Added to Fee	City & Stat					<del></del>	6 Election Campaign Financing —			$\neg$
Zip Country Zip Country Zip Country B. This corporation owes the current year Intangible Personal Property Tax.   'gs   No    9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name   10. Name	23		*				1 - 11			-
9. Name and Address of Current Registered Agent  MANESCALCHI, RANDY 18800 SAKERA ROAD HUDSON FL 34667  11. Pursuant to the provisions of Sactions 607 0502 and 807 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  SIGNATURE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. In Title  15.		Country		Coun	itry		8. This corporation owes the current year	Intangible	<u> </u>	
MANESCALCHI, RANDY 18800 SAKERA ROAD HUDSON FL 34667  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. J am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. J am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  PARTICLES AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  MANESCALCHI, RANDY  13. STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  PRINCHILL FL  13. ITTLE  PARTICLES AND DIRECTORS IN 12  14. INT. P.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. INT. P.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIR	24	25	29	30			<u> </u>		□ No	_
MANESCALCHI, RANDY 18800 SAKERA ROAD HUDSON FL 34667  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutuse, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutuse.  SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ITILE 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. STREET ADDRESS 19.		9. Name and Address of Curr	ent Registered Agent		<b>a</b> a 1		10. Name and Address of New Register	ed Agent		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, arm familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.  SIGNATURE  Signature hyere of printed name of implational agent and title appointment as registered agent, arm familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.  SIGNATURE  Signature hyere of printed name of implational agent and title appointment are registered Agent agent in the corporation's board of directors. I hereby accept the appointment as registered Agent agent and of directors. I hereby accept the appointment are registered Agent agent are regimed Amen remaintains)  DATE  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. TITLE  13. TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. TITLE  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. TITLE  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. ITILE  13. TITLE  14. CITY-ST-ZP  14. CITY-ST-ZP  15. TITLE  15. TITL	LIAN	IESCVI CHI DVIDA			81	Name				
HUDSON FL 34667  B4 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signatura, typed or preted name of registered agent and ties if applicable.  POFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  MANE MANESCALCHI, RANDY  7314 LIND HURST  SPRINGHILL FL  VP  MANESCALCHI, JODI  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZP  SPRINGHILL FL  ST  MAYO, BONNIE  MAYO, BONNIE  MAYO, CONNIE  STREET ADDRESS				-	82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
T1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agents agent agents. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. TIME  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. TIME  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. TIME  ADDITIONS/CHANGES TO Change   Addition  MANE SCALCHI, RANDY  7314 LIND HURST  23. SPRINGHILL FL  33. TIME  33. TIME  33. TIME  34. CITY-ST-ZP  TIME  AMYO, CONNIE  STREET ADDRESS  CITY-ST-ZP  TIME  ANAYO, CONNIE  STREET ADDRESS  CITY-ST-ZP  TIME  ANAYO, CONNIE  STREET ADDRESS  CITY-ST-ZP  TIME  ANAYO, CONNIE  STREET ADDRESS  CITY-ST-ZP  ACTIV-ST-ZP  ACTI				-	83					$\dashv$
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent and time of negative agent and time if applicable.    NOTE: Registered Agent agriculture required when reinstating)   DATE	1100	0,001	_,		63					
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the approximate agent and affect in an arm accept the obligations of, Section 607-5055, Florida Statutes.    Signature   Signature proprieted same of registered agent agent and titler if applicable.   (NOTE, Registered Agent alignature required when reinstating)   DATE					84	City \	چې چا اميد د د د د امالات د د د او چې او پارو پيميد <u>د د د د د د د د د د د د د د د د د د </u>	85	Zip Code*	~~
MANESCALCHI, RANDY   12 NAME   13 STREET ADDRESS   7314 LIND HURST   13 STREET ADDRESS   14 CITY-ST-ZIP	SIGNATURE	Signature, typed or printed name of registered a OFFICERS A	gent and title if applicable. (NOTE:	Registered A	gent s	signature required	3,			
1,3 STREET ADDRESS   7314 LIND HURST   1,4 CITY-ST-ZIP		l *				•				
CITY-ST-ZIP  SPRINGHILL FL  1/4 CITY-ST-ZIP  TITLE  VP  NAME  MANESCALCHI, JODI  STREET ADDRESS  7314 LINDHURST  SPRINGHILL FL  ST  NAME  MAYO, BONNIE  MAYO, BONNIE  MAYO, CONNIE  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAYO, CONNIE  SPRINGHILL FL  DELETE  1/1 TITLE  MAYO, CONNIE  SPRINGHILL FL  DELETE  4.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Addition  Addition  Addition  Change  Addition		7044 LIND HUDOT			_	ADDRESS				1
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DELETE	TITLE	ST	DELETE	3.1 TITI	LE .	<b></b>	Γ.	Cha	nge 🗌 Add	ition
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NAME 6.2 NAME			□ DELETE					☐ Cha	nge □Add	lition
a a street address			_ 5						<b>"</b>	
						ADDRESS				- }

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 of on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

727-862 0444