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 # P96000096323

1. Corporation Name

7355 S.W. 9TH STREET VERO BEACH FL 32968 .	7355 S.W. 9TH STREET VERO BEACH FL 32968				3.
2. Principal Place of Business	2a Mailing Address	····			3.
2. Principal Place of Business	2a Mailing Address				1
04	26				4.
21 Suite, Apt. #, etc.	Suite, Apt. #, etc.				5.
City & State	City & State	<u>-</u>		<u></u> ,	
Zip Country 24 25	Zip 29	Соц 30	intry		8.
9. Name and Address of Current	Registered Agent		81	Name	10.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90007 002 ***150.00



DO NOT WRITE IN THIS SPACE Date Incorporated or Qualifed 11/26/1996 Applied For FEI Number 65-0725302 Not Applicable \$8.75 Additional Certificate of Status Desired X Fee Required Election Campaign Financing \$5.00 May Be_ Trust Fund Contribution Added to Fees This corporation owes the current year Intangible Personal Property Tax. Name and Address of New Registered Agent P.O. Box Number is Not Acceptable) 390 NORTH ORANGE AVENUE **SUITE 1100** 83 ORLANDO FL 32801 85 Zip Code 84 City 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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Addition ☐ DELETE Change TITLE 1.2 NAME GORDON, WILLIAM J NAME 1.3 STREET ADDRESS STREET ADDRESS 7355 SW 9TH STREET VERO BCH FL 1.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ Change ☐ DELETE TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP Change - Addition --- DELETE .3.1 TITLE --TITLE- area to a several free and a service NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 5.1 TITLE TITLE

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 n an attachment with an address, with all other like empowered.

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

□ DELETE

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

Gordon

4/14/99 (561)770-0042

☐ Change

CR2E034 (11/98)

Addition