PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000097487

1. Corporation Name

DOUBLE V & W, INC.

Sep 20, 1999 8:00 am Secretary of State

09-20-1999 90003 025 ***550.00



| Principal Place | Mailing Address | Address | | i fållide: 118 i litte Allit Allit Batti Batti Batti Batti Jani atnat latit jant jant | | | |
|---------------------------------------|---|-------------------------------------|--|---|--|-----------------------|---------------|
| 17786 US HWY 301 N 17786 US HWY 301 N | | | | | | | |
| CITRA FL 32113 | | CITRA FL 32113 | | DO NOT WRITE IN THIS SPACE | | | |
| ļ | | | | | 3. Date Incorporated or Qualifed | O OI AOL | |
| | | • | | | 12/03/1996 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | I | Applied For |
| 21 | | | 26 P.O. Boy 1050 | | 59-3414541 | 414541 Not Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | \$8.75 Additional | | Additional | |
| 22 27 | | | | | 5. Certifcate of Status Desired | Fee F | Required |
| City & State | | City & State | | 6. Election Campaign Financing \$5.00 May Be | | | |
| 23 | | 28 CITRA | | | Trust Fund Contribution Added to Fees | | |
| Zip | Country | Zip F132113 | Count | • | 8. This corporation owes the current year Ir | | |
| 24 | 25 | 29 | $\perp \!$ | <u>LSA</u> | Personal Property Tax. | Yes | □No |
| | 9. Name and Address of Curre | nt Registered Agent | | na | 10. Name and Address of New Registered | Agent | |
| CANIER & VITTI | | | | 31 Name | | | |
| DANIEL A. VITTI | | | 8 | 32 Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| 17786 US HWY 301 N | | | <u> </u> | | <u> </u> | | |
| PO BOX 1050 | | | | 33 | | | |
| CITRA FL 32113 | | | 1 | 34 City | FI | 85 Zip | Code |
| 44 Diversity | to the annuising of Sections 607.05 | 02 and 607 1508 Florida Statutes | the abo | ve-named con | poration submits this statement for the purpose of | f changing it | ts registered |
| office or re | egistered agent, or both, in the State m familiar with, and accept the oblig | e of Florida. Such change was autho | onzea i | by the corporati | on's board of directors. I hereby accept the appoint | intment as I | registered |
| SIGNATURE | | AIOTE: Pag | -intered A | gent signature requin | ad when reinstating) DATE | | |
| | Signature, typed or printed name of registered ag | ND DIRECTORS | 13. | gent signature reduth | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECT | ORS IN 12 |
| 12. | D CHIOZKS A | DELETE | 1.1 TITL | E | | Change | |
| NAME | VITTI, DANIEL A SR | _ | 1.2 NAM | ie İ | | | 1 |
| STREET ADDRESS | 17786 US HWY 301 N | | 1.3 STRI | EET ADDRESS | | | |
| CITY-ST-ZIP | CITRA FL 32113 | | | -ST-ZIP | | | |
| TITLE | S | ☐ DELETE | 2.1 TITL | | | ☐ Change | Addition |
| NAME | VITTI, DANIEL A JR | | 2.2 NAM | ι ε | | | |
| STREET ADDRESS | | | 2.3 STRI | EET ADDRESS | | | |
| CITY-ST-ZIP | CITRA FL 32113 | | | Y-ST-ZIP | | | |
| TIRE | D . | ☐ DELETE | 3.1 TITL | | | Change | Addition |
| NAME | MORRIS, JIM JR | | 3.2 NAM | IE | | ~ | |
| STREET ADDRESS | 17786 US HWY 301 N | | 3.3 STR | EET ADDRESS | | | |
| CITY-ST-ZIP | CITRA FL 32113 | | 3.4. CITY | r-ST-ZIP | | | |
| TITLE | | DELETE | 4.1 TITLI | E | | Change | Addition |
| NAME | | | 4. 2 NAN | AE | | | |
| STREET ADDRESS | | | 4.3 STR | EET ADORESS | | | |
| City-St-ZiP | | | 4.4 CITY | -ST-ZIP | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | Change | Addition |
| NAME | | | 5.2 NAM | | | | |
| STREET ADDRESS | | | 5.3 STRI | EET ADDRESS | | | i |
| CITY-ST-ZIP | | | 5.4 CITY | -ST-ZIP | | | ۴, |
| ΠΤLE | | DELETE | 6.1 TITU | E | | ☐ Change | → ☐ Addition |
| NAME | | | 6.2 NAM | E | | | Į. |
| STREET ADDRESS | , | | 6.3 STRI | EET ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 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.