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 # P96000103346 1. Corporation Name

8801 INTERNATIONAL DRIVE, INC.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90151 022 ***150.00



Principal Place	e of Business	Mailing Address		_	-		90101 11011 (
14499 N DALE	MABRY HWY.	3959 VAN DYKE RD.							
SUITE 159 #392						DO NOT WRITE IN THIS SPACE			
TAMPA FL 33618 LUTZ FL 33549					3 Date Incom	3. Date Incorporated or Qualifed			
					12/24/19				
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number			App	olied For
21 980	1 INTERNATIONAL				59-34938	35		Not	Applicable
Suite, Apt.	· 	Suite, Apt. #, etc.		_		f Status Desired		\$8.75 A	dditional
22		27			5, Certificate 0	Jailus Desireu		Fee Red	quired
City & State City & State				Election Campaign Financia Trust Fund Contribution			· 🗆	\$5.00 i Added to	-
Zip Country Zip				ntry		ation owes the cur	rent vear Int	angible	
24 328/9 25 29 30				•	Personal Pr		· • · · · · · · · · · · · · · · · · · ·		□No
24 000	9. Name and Address of Curren	l	1,	_	10. Name and	Address of New	Registered	Agent	
				81 Name 4	ANIAEI	A DIM	PAN	d]
JACOBSON, RICHARD A				82 Street Addr	ess (P.O. Box Nun	nber is Not Accept		• • •	
501 E KENNEDY BLVD.				39	27 Vel	TOW Fir	1ch	LN.	
SUITE 1700				83					ļ
TAM	IPA FL 33602			84 City , ,				85 Zip C	ode
				120	172		<u> </u>	133	544
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida State	ites, the al	ove-named corp	oration submits this	s statement for the	purpose of of the appoi	changing its on the name of the change of th	registeréd listered
agent. I a	to the provisions of Sections 607.050 registered agent or both, in the State im familiar with, and accept the obligations.	tions of, Section 607.0505, Fl	logicia Statu	ites.	o 2001 a 01 a 100.	-			´
SIGNATURE	Wanne &	1. Allano			7	Anabry	1,19	99	\
	Signature, typed or printed name of registered ager			Agent signature require		IGNANCES TO OF	DATE AN	ID DIRECTO	DC IN 12
12.	P OFFICERS AN	ID DIRECTORS DELETE	13.	. D		CHANGES TO OF	7 To v. a	MM Change	Addition
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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 propowered 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 an antiachment with an address, with all other like empowered.

SIGNATURE: