Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90157 041 \*\*\*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 # P96000103890

1. Corporation Name

LUCKI	LEE RESTAL	O 1 11 11 11	1, 11,0														
Principal Pla	ce of Business			Mailing Add	dress				$\dashv$		<b>68</b> 1 11 <b>0 16</b> 110 <b>8</b> 1111			! <b>                                     </b>		43)	
516 NW 75TH	STREET			516 NW 75T	'H STREET												
GAINESVILLI: FL 32607			GAINESVILLI					DO NOT WRITE IN THIS SPACE									
									3. [	Date Incor	porated or Qu						
									1	01/02/1	997					1	
2. Principal	Place of Business	s		2a. Mailing	Address					FEI Numb					Applied For		
21				26					!	59-3416	<u>6677                                   </u>				Not Applica		
Suite, A of	t. #, etc.			Suite, A	pt. #, etc.				5. (	Certifc ate	of Status Des	ired			A dditiona Required	'	
City & Sta	ate			City & S	State	,			6. (	Election C	ampaign Fina	ncing		\$5.0	0 May Be		
23				28							d Contribution	_	⊔ 	Adde	tc Fees		
Zip		Court	ry	Zip		Cou	ntry		8.	This corpo	ration owes th	ne curren	ntyear r		_		
24	25	<u> </u>		29		30					Property Tax.			Yes	_ _No		
	9. Name an	d Addr	ess of Current	Registered Ag	gent		04		10.	Name and	d Address of	New Re	gistere	d Ageht			
1 E:	CAM TU						81	Name									
	NW 75TH STE	BEET					82	Street Ac	dress (P.	O. Boy Nu	mber is Not A	cceptabl	le)				
	INESVILLE FL 3						83										
	INCOVILLE I E C	JEUU?					03										
<b>~</b> (							0.4	City						11-7	Code		
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6.4 CITY-ST-ZIP 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 chapter or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

□ DELETE