PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700003650

1. Corporation Name

GANO'S BAIL BONDING AGENCY, INC.

					I (ABIIA) II PARIL INKI NOME ONE OF A SAME OF ANY		
Principal Place of Business Mailing Address							
1436 N. PINE HILLS ROAD 1436 N. PINE HILLS ROAD							
ORLANDO FL 32808		ORLANDO FL 32808			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 01/08/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
		26			59-3427643	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, e			etc.		\$8.7	75 Additional	
22	~	27	المناهية بمحاج حراس		5. Certificate of Status Desired Fee Required		
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
23		28					
Zip	Country	Zip	Coun	try	8. This corporation owes the current year Intangible		
24	25	29 3	30		Personal Property Tax.	□No	
	Name and Address of Curren	t Registered Agent		241 41	10. Name and Address of New Registered Agent		
CAN	O CAM			81 Name	}		
GANO, SAM 1436 N. PINE HILLS ROAD			<u> </u>	B2 Street	2 Street Address (P.O. Box Number is Not Acceptable)		
		٠	<u> </u>				
ORL	ANDO FL 32808			83			
			-	B4 City	85	Zip Code	
				1 1	FL T		
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obligation	of Florida. Such change was au	Inonzea	ov tne cord	d corporation submits this statement for the purpose of changin poration's board of directors. I hereby accept the appointment a	ig its registered as registered	
SIGNATURE					e required when reinstating) DATE		
	Signature, typed or printed name of registered ager	t and title if applicable. (NOTE: I D DIRECTORS	_	gent signature	e required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12	
TITLE	PD OFFICERS AN	□ DELETE	13.	F	ADDITIONS/CITATOES TO CITATOES AND SITE		
NAME.	GANO, SAM		1.2 NAN				
	1436 N. PINE HILLS ROAD			EET ADDRESS	8		
STREET ADDRESS	ORLANDO FL 32808			/-ST-ZIP			
CITY-ST-ZIP	ONLANDO I E OZOGO	☐ DELETE	2.1 TITL		□ Cha	ange Addition	
			2.2 NA			- }	
NAME				EET ADDRESS	s		
STREET ADDRESS		•		Y-ST-ZIP			
CITY-ST-ZIP		DELETE .	3.1·TITI		Cha □ Cha	ange	
NAMÉ		<u> </u>	3.2 NAM			-	
STREET ADDRESS				EET ADDRESS	s		
				Y-ST-ZIP			
CITY-ST-ZIP TITLE	 	☐ DELETE	4.1 TIT		Cha	ange 🗌 Addition	
NAME		-	4. 2 NA				
STREET ADDRESS			I I	REET ADDRESS	s		
				Y-ST-ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TIT		Cha	ange Addition	
NAME	-	—	5.2 NA				
STREET ADDRESS			5.3 STF	REET ADDRESS	s		
			1	Y-ST-ZIP		1	
CITY-ST-ZIP		☐ DELETE	6.1 TITI		- Cha	ange Addition	
NAME		<u></u>	6.2 NA	Æ			
INCUSE.							

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 changes, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Apr 25, 1999 8:00 am | Secretary of State

04-25-1999 90033 030 ***150.00