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 # P97000014095

Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90040 046 ***150.00

Principal Plac 13498 WALSIM LARGO FL 3374	ATIONAL INSTITUTE FOR S O. e of Business GHAM RD 44	Mailing Address 13498 WALSINGHAM RD LARGO FL 33744 2a. Mailing Address 26 Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/13/1997 4. FEI Number APPLIED FOR APPLIED FOR 5. Certificate of Status Desired Fee Required Fee Required
City & State City & State			6. Election Campaign Financing \$5.00 May Be	
Zip	Country	Zip	Country	Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible
24	25	29 3	30	Personal Property Tax. ☐ Yes ☐ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
BODETSKY MICHAEL				
RODETSKY, MICHAEL 13498 WALSINGHAM RD			82 Street Add	ress (P.O. Box Number is Not Acceptable)
LARGO FL 33744			83	
DANGO 1 E 337 44			03	
			84 City	Zip,Code
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) DATE				
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Claddition
TITLE	D Rodetsky, Michael	(_) DECE1E	1.1 TITLE 1.2 NAME	, 为 ☐ Change ☐ Addition
NAME	13498 WALSINGHAM RD		1.3 STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	LARGO FL 33744		1.4 CITY-ST-ZIP	
TITLE	E-1100 E-00744	☐ DELETE	2.1 TITLE 1/#	☐ Change ☐ Addition
NAME				GIORIA RODETSKY
STREET ADDRESS			2.3 STREET ADDRESS /	SIORIA RODETSKY Rd
CITY-ST-ZIP			2.4 CITY-ST-ZIP	LARGO, FL 33704
TITLE		☐ DELETE	3.1 TITLE	, , , , , , , , , , , , , , , , , , , ,
NAME			OIL I COME	RAIG RODETSKY DO
STREET ADDRESS			3.3 STREET ADDRESS	3498 WACSINGHALL Rd
CITY-ST-ZIP			3.4. CITY-ST-ZIP	ARGO FC 33714 (Change DAGuillon)
TITLE		☐ DELETE	41 TITLE	Change CAddition
NAME			4,2 NAME	2100 WALCINGHAMRO
STREET ADDRESS			4.3 STREET ADDRESS	LLEN POTERCED 3498 WALSINGHAMRD ARGO FL J3774
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY+ST-ZIP Z	Change Addition
NAME			5.2 NAME	C overage C Mountain
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	∴ Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

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.

SIGNATURE: