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

FILED Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90048 024 ***150.00

5-1-99

D	OCL	JMENT	#	PQ7	7000	<u> </u>	9862
	_					.	JUUL

I. Corporation Name

SIGNATURE:

PRICE VENTURES, INC

Principal Place	e of Business	Mailing Address		j			
3719 72ND AVE		3719 72ND AVE E SARASOTA FL 34243					
sarasota fl.: Us	34243	US		DO NOT WRITE IN THIS	SPACE		
33		00		3. Date Incorporated or Qualifed			
				03/04/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	1 1	4. FEI Number	Apr	plied For	
5930		6 5930 M	clalenca	LN. 65-0732501		t Applicable	
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A Fee Re		
City & State	140.014	City & State Lake Wor		Election Campaign Financing Trust Fund Contribution			
Zip 33	463 25 US	Zip 33463 3	Country US	 This corporation owes the current year Inta Personal Property Tax. 		□No	
<u></u>	9. Name and Address of Current I		1-1	10. Name and Address of New Registered	lgent		
			81 Name	Tana Qui class		-	
LYON			82 Street Ac	Idraes (P.O. Box Number is Not Accertable)			
	72ND AVE E		Street Address (P.O. Box Number is Not Acceptable)				
SARA	ASOTA FL 34243		83				
					75 75 6		
			84 City	ike worth FL	37	5°463	
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes.	, the above-named co	orporation submits this statement for the purpose of	changing its	registered	
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was auth	norized by the corpora	ation's board of directors. I hereby accept the appoir	itment as reg	jistered	
•	in rantillar with, and adject the congula		D Citatoro.	S-1-9	9		
SIGNATURE .	Signature, typed or printed hame of registered agent a	no de if applicable. (NOTE: Re	egistered Agent signature requ				
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
TLE	Р	☐ DELETE	1.1 TITLE		Change	Addition	
IAME)	PRICE, DEBRA		1.2 NAME				
TREET ADDRESS	4010 SOUTH 57TH AVENUE		13 STREET ADDRESS				
ITY-ST-ZIP	LAKE WORTH FL 33463		1.4 CITY-ST-ZIP				
ITLE		☐ DELETE	21 TITLE		Change	☐ Addition	
IAME			2.2 NAME				
TREET ADDRESS			2.3 STREET ADDRESS				
ITY-ST-ZIP			2.4 CITY-ST-ZIP				
MLE		☐ DELETE	3.1 TITLE		Change	☐ Addition	
(AME			3.2 NAME				
TREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			34, CiTY-ST-ZIP				
ITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition	
IAME			4.2 NAME		=		
}	l		4.3 STREET ADDRESS				
STREET ADDRESS			4.4 CITY-ST-ZIP				
TITY-ST-ZIP		☐ DELETE	5.1 TITLE		Change	☐ Addition	
IAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
i			5.4 CITY-ST-ZIP				
CITY-ST-ZIP		DELETE	6.1 TITLE		Change	Addition	
TITLE		2	6.2 NAME				
IAME			6.3 STREET ADDRESS				
STREET ADDRESS			6.4 CITY-ST-ZIP				
CITY-ST-ZIP	and for the defendance of the country of the	this filing door not qualify for the		o Section 119 07(3)(i) Florida Statutes I further con	rify that the in	oformation	
indicated of officer or of	on this annual report or supplemental a	innual report is true and accura er or trustee empowered to exe	te and that my signat cute this report as re	n Section 119.07(3)(i), Florida Statutes. I further cert ure shall have the same legal effect as if made unde quired by Chapter 607, Florida Statutes; and that m	er oam; mac i	ram an	