## 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 # **P97000022779**1. Corporation Name

PARROT GALLERY, INC.

Principal Place of Business

Mailing Address

## **FILED** Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90017 050 \*\*\*150.00



12720 N A1A VERO BEACH FL 32963		VERO BEACH FL 32963			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	727 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
		1			03/13/1997		
2 Principal DI	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
<del></del>	ace of business	26			65-0770177	Not Applicable	
21	# 010	Suite, Apt. #, etc.				\$8.75 Additional	
Suite, Apt. 1	#, etc. ·	27			5. Certifcate of Status Desired	Fee Required	
City & State	9	City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Count	try	8. This corporation owes the current year		
24	25 29		30		Personal Property Tax.		
<del></del>	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registere	d Agent	
		2,	1	Name	· ·	,	
CALBWELL, WILLIAM W			-				
756 BEACHLAND BLVD				82 Street Address (P.O. Box Number is Not Acceptable)			
	C BEACH FL 32963		. [	33			
	•		8	34 City		85 Zip Code	
2350 4, 214		4			<u> </u>	<u> </u>	
11. Pursuant	to the provisions of Sections 607.0503	2 and 607.1508, Florida Statutes	s, the abo	ove-named cor	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	or changing its registered ointment as registered	
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligat	tions of, Section 607.0505, Flori	da Statut	es.	tion's Board of directors the cost accept the opp		
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: f	Registered A	gent signature requi	ired when reinstating) DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
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	12720 N A1A		B .	EET ADDRESS	•		
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NAME			1	EET ADDRESS			
STREET ADDRESS							
CITY_ST_ZIP			6.4 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.