FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

FILED Apr 02, 1999 8:00 am

ANN	UAL REPORT	(10 (10 to 10 to 1	etary of State	Secretary of S	
	1999	DIVISION	1	04-02-1999 90002 050 **	*150.00
DOCU 1. Corporation	MENT # P97	000037811	V		
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Principal Plac	ce of Business	Mailing Address		_	
216 CONNECTICUT ST					
FT. MYERS BEACH 216 CONNECTICUTST TOPING 33931				DO NOT WRITE IN THIS SPA	CE
FLORIDA, 33931 FLORIDA 33931				3. Date Incorporated or Qualified	
			22,43/	4-28-1997	A1:- 4 F
	Place of Business	2a. Mailing Address	· calan	4. FEI Number 65-0749896	Applied For Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	<u> </u>	5. Certifcate of Status Desired	3.75 Additional
22		27			Fee Required
City & Star	TE	Chy & State		1 - 1 - 1	5.00 May Be Added to Fees
Zip	Country	Ζiρ	Country	8. This corporation owes the current year Intangib Personal Property Tax.	le
24 25 29 30 30 9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
FR4x	UK TEICHLE	D	81 Name		
				ress (P.O. Box Number is Not Acceptable)	
77 RUYERS BEACH, FL 33931 83					_
77, 6	iguas voridi,	,			7.0.
			84 City	FL 85	Zip Code
11 Durguant	to the provisions of Sections 607.0	1502 and 607 1508. Florida Sta	tutes, the above-named com	poration submits this statement for the purpose of chang	ning its registered
office or r	registered agent or both in the Sta	ate of Florida, Such change was	s authorized by the comoration	on's board of directors. I hereby accept the appointment	
office or r agent. I a	registered agent, or both, in the Sta am familiar with, and accept the obt	ate of Florida. Such change was ligations of, Section 607.0505, I	s authorized by the corporation florida Statutes.	on's board of directors. I hereby accept the appointmen	t as registered
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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 one an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-18-99