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 # P97000057528

RALPH MAHAIRAS, INC.

	e of Business	Mailing Addres	99							
1897 CLEARWA	TER HARBOR DRIVE		TER HARBOR DI	RIVE	-	•				
LARGO FL 3377	70	LARGO FL 3377	0			DO NOT WRI	TE IN THIS	SPACE		
						3. Date Incorporated or Qualifed	TE III TING	OF ACE	1.454	1 17
						06/30/1997				. 2
Deineinal Di	lace of Business	2a. Mailing Add	drace			4. FEI Number		ΙΔr	plied For .	1
Z. Principal P	lace of business	<u>⊢</u> ,	J1635			59-3456079	•	_ `	t Applicable	7 }
Suite, Apt.	# etc	26 Suite, Apt.	# etc				· <u>·</u>		Additional	;
Suite, Apt.	#, C IC.	27	w, 010.			5. Certifcate of Status Desired		Fee Re		
City & State	9	City & Stat	e			6. Election Campaign Financing		\$5.00	May Be	1
23		28				Trust Fund Contribution		•	to Fees	
Zip	Country	Zip		Country	r	8. This corporation owes the curr	ent vear int	angible		1
24	25	29	30			Personal Property Tax.		☐ Yes	□No	1
	9. Name and Address of Cur					10. Name and Address of New I	Registered	Agent]
				81	Name					
	IAIRAS, RALPH			82	Street Ade	iress (P.O. Box Number is Not Accepta	ahla)			┨
1897	CLEARWATER HARBOR DRIV	VE		02	Silber Auc	mess (F.O. Box Number 13 Not Accept		and the second second	· ** * * * * * * * * * * * * * * * * *	
LARO	GO FL 33770			83			13.	想信法	最老的	1
				24	00		<u> </u>	85 Zip	Code	4
				84	City		FL	_ 95 Zib .	Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Flo	orida Statutes, tl	he above	e-named cor	poration submits this statement for the	purpose of	changing its	registered	1
office or r	registered agent, or both, in the Sta im familiar with, and accept the ob-	ate of Florida. Such cha	ande was autho	rized by	the corporat	ion's board of directors. I hereby acce	pt the appoi	ntment as re	gisterea	
SIGNATURE							DATE			1 _
45	Signature, typed or printed name of registered	AND DIRECTORS	(NOTE: Regis	13.	nt signature requir	ADDITIONS/CHANGES TO OF		ID DIRECTO	ORS IN 12	ģ
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	I IOCINO AN	DUNCON		
	DVCT		DELETE	11TITLE		5 75 (65 - 7.5)		☐ Change	☐ Addition	4
TITLE	PVST			1.1 TITLE		2.585.403		☐ Change	☐ Addition	14/4
NAME	MAHAIRAS, RALPH			1.2 NAME	TADDOCCC	2.245.46.3		☐ Change	☐ Addition	034 (1
NAME STREET ADDRESS	MAHAIRAS, RALPH 1897 CLEARWATER HARBO			1.2 NAME 1.3 STREE	TADDRESS) P89963		☐ Change	☐ Addition	20E034 /4
NAME STREET ADDRESS CITY-ST-ZIP	MAHAIRAS, RALPH 1897 CLEARWATER HARBO LARGO FL 33770	r drive		1.2 NAME 1.3 STREE 1.4 CITY-S) 789±03	_			P2E034 /
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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:

FILED

Feb 18, 1999 8:00am

Secretary of State

02-18-1999 90068 012 ***150.00