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 # P97000080557

C & H WEST INDIAN STORE OF NAPLES INC.

Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90056 039 ***150.00



Principal Place of Business Mailing Address				-		
2894 E TAMIAM NAPLES FL 341	AMIAMI TRAIL TE 34112 ipal Place of Business Apt. #, etc. k State Country 25 9. Name and Address of Current PLUMMER, CLIVE 2894 E TAMIAMI TRAIL	2894 E TAMIAMI TRAIL NAPLES FL 34112				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed 09/17/1997
2. Principal P	lace of Business	2a. Mailing Address				- 4. FEI Number Applied For
21		26				59-3470944 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State	28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip Country		Zip 29				8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New Registered Agent
•				81	Name	
2894 E TAMIAMI TRAIL				82	Street Add	lress (P.O. Box Number is Not Acceptable)
NAPLES FL 34112				83		
				84	City	FL 85 Zip Code
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a tions of, Section 607.0505, Flor	utnorizeo rida Stati	i by utes	the corporation	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered age			Agen	nt signature require	red when reinstating) DATE DATE
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 🏗			
NAME.	PLUMMER, CLIVE		1.2 N			
STREET ADDRESS	2894 E TAMIAMI TRAIL	•			FADDRESS	•
CITY-ST-ZIP	NAPLES FL 34112				T-ZIP ·	. Change Addition
TITLE	DST	☐ DELETE 2.11			l	. Change Discussion
; NAME	PLUMMER, HARDRESS_	•	2.2 N		.	
STREET ADDRESS	2894 E TAMIAMI TRAIL		2.3 S1	TREET	T ADDRESS	•
CITY-ST-ZIP	NAPLES FL 34112				ST-ZIP	☐ Change ☐ Addition
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NAME			3.2 N		ļ	
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NAME			6.2 N		T ADDRESS	
OTOCET LODGES	.1		0.35	IKEE	I ADDRESS I	

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.

6.4 CITY-ST-ZIP

SIGNATURE: