PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMEN Katherine Parris

Secretary of State

FILED Aug 17, 1999 8:00 am Secretary of State

1999		S Divisions O	CORPORATIONS	08-17-1999 9000	6 006 ***5	550.00
DOCUMENT 1. Corporation Name MODERN MOBILE		083648 🗸				
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Principal Place of Business		Mailing Address		- I LOTINGON HAL BOAR TERM BONK CONTRACTOR	6 10 100 milio Aliik d	
10008 S. US HWY ONE		10008 S. US HWY F				
PORT ST LUCIE FL 34952		POBL ST LUCIE FL 949	2	DO NOT WRITE IN THE	SPACE	
US		US		3. Date Incorporated or Qualified 09/25/1997		. (
2. Principal Place of Busine	253	2a. Mailing Address	JF CI	4. FEI Number	App	lled For
21		26 510 3	5° 37	65-0785774	\$8.75 A	Applicable
Suite, Apt. #, elc.		Suite, Apt. #, etc.	21m Beach F	5. Certifcate of Status Desired	Fee Red	
City & State		City & State	32/10	6. Election Cempaign Financing	\$5.00	
3	Country	- 28	Country	/ Trust Fund Contribution 8. This corporation owes the current year in	Added to	p Fees
Zip ⋈ [i	Country 25	29 33407	30 PAIN BCL	Personal Property Tax.	Yes	□No
	and Address of Current		041 312	10. Name and Address of New Registered	Agent	
PEREGRY RAR	RY LEE		81 Name	Deca COUNTON		
2714 SE S BLACKWELL OR			82 Street Add	ress (P.O. Box Murgeer is biot Acceptable)	/	
PORT ST LUCIE	FL 34952		83	JUST PAIM BEAC	\ellay	
			84 City	FI	85 Zin C	ode A 2
11 Dunment to the provide	one of Sections 607 0502	and 607 1508. Florida Stat	utes the above-named con			
office or registered age agent. I am familiar with	int, or both, in the State of	Viorida. Such change was ans of Section 697.0505, F	authorized by the corporati lgrida Statutes.	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	sintment as reg	jistered
SIGNATURE /		e in un	V ·		-99	'
Signature, typeti o	or printed name of registered agent of OFFICERS AND		TE: Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
mre D	9,7,02,10,7512	DELETE	time P	Casasad	Change	Addition
	, Barry Lee		12 NAME	510 384 ST		
	S BLACKWELL DR		1.3 STREET ADDRESS		1 434	1
	LUCIE FL 34952	☐ D€LETE	1.4 CITY-ST-ZIP	WEST THIMBEACH, 1	☐ Change	Addition
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STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE	,	DELETE	3.1 TILE		Change	Addition
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CTY-ST-ZP	- liti	a ned to	3.4. C/TY-ST-ZIP		Change	Addition
	june	Charle (S)	4.2 NAME			
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NAME	me-	planation				——————————————————————————————————————
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SIGNATURE: