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

P97000085457 DOCUMENT

1. Corporation Name

NICK PAVLETIC, INC.

Principal Place of Business	Mailing Address
131 CINDY COURT LAKE MARY FL 32746	131 CINDY COURT LAKE MARY FL 32746

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90107 022 ***150.00



						
Principal Place	e of Business	Mailing Address				
131 CINDY COL LAKE MARY FL		131 CINDY COURT LAKE MARY FL 32746				
Gue minit	. 421 14	Olite water Le des le			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed 10/02/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
21	add of Basilloos	26			59-3503365 Not Applicable	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27			5. Certificate of Status Desired Fee Required	
City & State	е	City & State		•	6. Election Campaign Financing S5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year Intangible	
24	25		30		Personal Property Tax. Yes No	
	9. Name and Address of Curren	t Registered Agent		04 1	10. Name and Address of New Registered Agent	
DAVA	ETIC NICK		ļ	81 Name		
	LETIC, NICK CINDY COURT			82 Street A	Address (P.O. Box Number is Not Acceptable)	
	E MARY FL 32746		-	83		
]			ì		85 Zip Code	
					. FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of registered ager			Agent signature rec	equired when reinstating) DATE ADDITION OF CHANGE TO SECURE OF AND PURE CTORS IN 13	
12.		ID DIRECTORS	13.	 	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
TITLE	P	□ DELETE	1.1 TIT	`	Criange [] Addition	
NAME	PAVLETIC, NICK		1.2 NA			
STREET ADDRESS	131 CINDY COURT		1.3 STI	REET ADDRESS	İ	
CITY-ST-ZIP	LAKE MARY FL 32746			Y-ST-ZIP	Change Addition	
TITLE		☐ DELETE	2.1 TIT	re	☐ Change ☐ Addition	
NAME		•	2.2 NA	ME		
STREET ADDRESS			2.3 ST	REET ADDRESS		
CITY-ST-ZIP	<u> </u>		2. 4 Cī	TY-ST-ZIP		
TITLE		☐ DELETE	3.1 गि	le	Change Addition	
NAME		-	- 3.2 NA	ME	•	
STREET ADDRESS			3.3 \$T	REET ADDRESS		
CITY-ST-ZIP			3.4. Cf	TY-ST-ZIP		
TITLE		☐ DELETE	4.1 TIT	ue T	☐ Change ☐ Addition	
NAME			4.2 N	WE	,	
STREET ADDRESS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP	•		4.4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	5.1 TIT		☐ Change ☐ Addition	
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 ST	REET ADDRESS		
CITY-ST-ZIP			5.4 Cf	Y-ST-ZIP		
TITLE		DELETE	6.1 TIT	TE.	☐ Change ☐ Addition	
NAME	_		6.2 NA	ME		
STREET ADDRESS	• • •		6.3 ST	REET ADDRESS).	
			1	Y-ST-ZIP		
CITY-ST-ZIP			3.70	<u></u>		

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 opporation or the feceiver 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.