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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mort am

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P97000092039

PERFECT STATIONS INC

Principal Place of Business

SIGNATURE:

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 26, 2000 8:00 am Secretary of State

04-26-2000 90086 014 ***150.00

CR2E034 (10/97)

727-480-3109

Daytime Phone #

Fillicipal Flace	e or business	Walling Address				
3000 BELCHER ROad						
					DO NOT WRITE IN THIS SPACE	
n					3. Date incorporated or Qualified	
PALM HARBOR FL-34683.				1		
	lace of Business	2a. Mailing Address		 -	4. FEI Number Applied	For
21		26			59-3455/61 Not App	licable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additio	nai
22		27			Fee Required	1
- City & State	9				- 6. Election Campaign Financing - \$5:00 May E	3e ~
23		28			Trust Fund Contribution	s
Zıp	Country Zip		Country		8. This corporation owes or has paid the current year Intangible	
24	25 29 3			Personal Property Tax due June 30. Yes		·
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name						
A212	2 MITHWANT		181	Name		
			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
8609 2915 ST F.				<u> </u>		
	2 j 2 j		83			
D 4 0	OT ILL PAR PINO	1.4	84	City	85 Zip Code	
	RISH, FL-342			<u> </u>	FL 2 2 2 2 2 2 2 2 2	
11. Pursuant t	to the provisions of Sections 607,0502 a	and 607.1508, Florida Statutes, Florida, Such change was autl	the above	e-named o	corporation submits this statement for the purpose of changing its registeration's board of directors. I hereby accept the appointment as register	stered ered
agent. I ar	m familiar with, and a cept the bligario	s of Section 607.0505, Florid	la Statutes	S.	signature board of animotors, providing account the appointment as regions	
SIGNATURE _	XI. Man				3-24-00	
Signature, typed or minited name of registered agent and title if applicable (NOTE: Reg				ent signature r	equired when reinstating) DATE	
12.	OFFICERS AND I	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	Addition
TITLE PI)	A 2 1 2 5 2 2 1		1 1 TITLE		ш Grange ш A	וייייייייי
NAME -	HAIZ MATHW	ANI 12-34219	12 NAME	<u>\</u>		1
STREET ADDRESS	A 212 MITHWANT 12-34219 8609, 291657 E PARRISH					1
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NAME /	,		2.2 NAME			
STREET ADDRESS	8609 29555 E PARRISH FL-34219		2.3 STREET ADDRESS			\ \ \ \ \
CITY - ST - ZIP	PARRISH 12.34217		2. 4 CITY - ST - ZIP		☐ Change ☐ A	Addition
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NAME			5.2 NAME			ļ
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CITY - ST - ZIP		☐ DELETE	5 4 CITY-S	ST - ZIP	☐ Change ☐ A	ddition
TITLE		רון טבנבונ	6.1 TITLE		Challe L P	aunion
NAME		į	6 2 NAME			, }
STREET ADDRESS			63 STREET			
CITY-ST-ZIP	artific that the information and in the	this filing does not exactly for a	6 4 CITY - S		in Section 119.07(3)(i), Florida Statutes. I further certify that the inform	ation
andiantad.	on this applied report or supplemental a	innual raport is true and accur-	ate and the	at my cian	ratura chall have the came local effect ac it made under nath: that I am	an i
officer or director of the corporation or the receiver or typetee 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 attack of the statute of the statute of the corporation or the receiver or typetee 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 attack of the statute of						
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