PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000092145

SKRCO, INC.

Principal Place of Business

Mailing Address

9311 FORRESTER DRIVE BRADEN TON FL 34202 9311 FORRESTER DRIVE BRADENTON FL 34202

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90134 039 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

10/27/1997

21	ace of Business	2a. Mailing Address			4, FEI Number		1.1	ppileu rui	
		26 SKRCO, IN	\mathcal{C}		65-0909228		N	ot Applicable	
Suite, Apt. #	≠, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		• •	Additional equired	
22		27 P.O. Bux 20	7365					<u> </u>	
City & State			7		6. Election Campaign Financing Trust Fund Contribution	1.1			
23		28 BRADENTON	Country					10 1 000	
Zip	Country	Zip 29 34204-0365 3			This corporation owes the current Personal Property Tax.		lgible □ Yes	□No	
24	25		U MA	uno	10. Name and Address of New Reg				
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Iveg	ilatered A	90111		
MASON, JOSEPH C JR MASON & ASSOCIATES, P.A. 17757 U.S. HIGHWAY 19 NORTH #500 CLEARWATER FL 34624									
				82 Street Address (P.O. Box Number is Not Acceptable)					
					<u></u>				
				City		FL	85 Zip	Code	
office or re agent. I am	to the provisions of Sections 607.0502 agistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent	r Florida. Such change was autons of, Section 607.0505, Floridation ::	norized by la Statutes	the corporatio	oration submits this statement for the puin's board of directors. I hereby accept the third third is the puint when reinstating.	rpose of c ne appoint	ment as re	s registered egistered	
12.	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND DIRECT		ORS IN 12		
TITLE	D	☐ DELETE	1,1 TITLE				Change		
	ROBERTS, STEVEN K		1.2 NAME		•				
	9311 FORRESTER DRIVE		8	TADDRESS					
			1.4 CITY-S						
CITY-ST-ZIP	BRADENTON FL 34202	☐ DELETE	2.1 TITLE	1-219			☐ Change	☐ Addition	
TITLE			2.2 NAME				_ ,	_	
NAME				T 4DDDE00					
STREET ADDRESS				TADDRESS			•		
CITY-ST-ZIP		☐ DELETE	2. 4 CITY-5 3.1 TITLE	ST-ZIP			☐ Change	Addition	
TITLE		↑ DECE IE							
NAME			3.2 NAME	\					
STREET ADDRESS				TADDRESS	•				
CITY- ST- ZIP			3.4. CITY-	ST-ZIP			Change	Addition	
TITLE		☐ DELETE	4.1 TITLE		•		□ Change	- DAGGGG	
NAME			4. 2 NAME	l					
STREET ADDRESS			4.3 STREE	T ADDRESS					
CITY-ST-ZIP			4.4 CITY-5	T-ZIP			C7 Charren	- Addis-	
TITLE		☐ DELETE	5.1 TITLE				Change	Addition	
NAME			5.2 NAME		•				
				T ADDRESS					
STREET ADDRESS			5.4 CITY-S	T-ZIP					
STREET ADDRESS CITY-ST-ZIP									
· ·		☐ DELETE	6.1 TITLE	•			Change	nottibbA L.j	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME				∐ Change	Addition	
CITY-ST-ZIP TITLE		☐ DELETE	6.2 NAME	T ADDRESS			Change	n ☐ Addition	

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.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>/ - 4-98</u> Date 941-753-7668 Daytime Phone # ZE034 (11/98)