PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700093190

1. Corporation Name

602, INC.

Principal Place of Business	Mailing Address
720 MAGNOLIA AVENUE NEW SMYRNA BEACH FL 32168	P O BOX 894 NEW SMYRNA BEACH FL 31170-0894 US

FILED Mar 08, 1999 8:00 am Secretary of State

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NEW SMYRNA BEACH FL 32168 NEW SMYRNA BEACH FL 31170-0894 US 2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 2c. City & State 2d. City & State 2d. City & State 2d. City & State 2d. Country 2d. Mailing Address 2d. M											
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City & State										\$8.75	Additional
City & State Country Zip	22		27					5. Certificate of Status Desired		Fee Re	equired
Zip		ity & State City & State						6. Election Campaign Financing	_ 		
9, Name and Address of Current Registered Agent 9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 11, Pursuant to the provisions of Sections 807,0502 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 approximent as 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 approximent as 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 approximent as 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 approximent as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the 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 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 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 submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of 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, Statutes, the above-named corporation submits this statement for the purpose of changing its reg	23		28								to Fees
9, Name and Address of Currant Registered Agent WILEY, DAVID J 720 MAGNOLIA AVENUE NEW SMYRNA BEACH FL 32168 82 Street Address (P.O. Box Number is Not Acceptable) 720 Magnotia members of the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. In manifest with, and accept the obligations of. Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In manifest with, and accept the obligations of. Section 607 0505, Florida Statutes. 71. 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 agent. In manifest with, and accept the obligations of Sections 07 0505, Florida Statutes. 71. Pursuant to the provisions of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I manifest with and accept the obligation of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I manifest with and accept the obligation of Section 607 0505, Florida Statutes. 71. Pursuant to the provisions of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. 72. PD						/					
WILEY, DAVID J 720 MAGNOLIA AVENUE NEW SMYRNA BEACH FL 32168 83 84 City FL 85 Zip Code 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 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, are familiar with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE Signatura. Types of primer agent and tills a spelliculus. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17.1.E PD OFFICERS AND DIRECTORS 11. STREET ADDRESS VILEY, DAVID J SIGNATURE	24				0				Penistered A		1140
WILEY, DAVID J 720 MAGNOLIA AVENUE NEW SMYRNA BEACH FL 32168 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 697.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 67.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 67.0505, Florida Statutes. SIGNATURE Signature		9. Name and Address of Current	Registere	d Agent	81	Name		10, Name and Address of New I	registered i	-tgent	
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11. Pursuant to the provisions of Sections 807.0502 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 Floridas, Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floridas, Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floridas Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 1.9. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17.TLE PD DELETE 1.1TLE DELETE 1.1T					84	City			FL	85 ∠ip	Code
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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.

OFFICER OR DIRECTOR