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

CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000095113

STAN VINKE CORPORATION

Principal Place of Business					
2529 DEER RUN EAST CLEARWATER FL 33761	2529 DEER RUN EAST CLEARWATER FL 33761	DO NOT WRITE IN T			
		Date Incorporated or Qualifed 11/05/1997			
Principal Place of Business 1	2a Mailing Address 26	4. FEI Number (ARPAGE) 1008 - 59-350			
Suite, Apt. #, etc.	Suite, Apt #, etc.	5. Certifcate of Status Desired			
City & State	City & State	Election Campaign Financing Trust Fund Contribution			
Zip Country	Zip Country	This corporation owes the current year			

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90040 018 ***150.00



CLEARWATER FL 33761 CLEARWATER FL 33761		DO N	IOT WEIT	TE IN THIS S	PACE				
					Date Incorporated or		IE III TING C	1 AGE	$\overline{}$
					11/05/1997	4 0000			ļ
Principal Place	of Business	2a Mailing Address			4. FEI Number			Api	olled For
21	G. Basiness	26			WARPLAED FOR	- 54-	35615	33 No	Applicable
Suite, Apt. #, et	tc.	Suite, Apt #, etc.				a a word		\$8.75 A	dditional
22		27			5. Certifcate of Status D	esirea		Fee Re	quired
City & State		City & State			6. Election Campaign Fi	inancing		\$5.00	May Be
23		28			Trust Fund Contributi	on		Added t	o Fees
Zip	Country	Zip Country			8. This corporation owe	s the curr			
24	25	29 30			Personal Property Tax Yes No				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
14.01.11417	TO ANTHONY		81	Name					
JAQUINTO, ANTHONY 2529 DEER RUN EAST		82	82 Street Address (P.O. Box Number is Not Acceptable)						
	ATER FL 33761		_						
CLEARN	MIER FL 33/61		83	1					
			84	City			FL	85 Zip 0	Code
11. Pursuant to th	ne provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abov	e-named corp	oration submits this stateme	nt for the	purpose of c	hanging its	registered
office or regis	tered agent, or both, in the State o miliar with, and accept the obligati	r Florida. Such change was autr	norized by	the corporation	on's board of directors. I here	eby accer	of the appoint	ment as reg	gistered
, and the second	iffiliar with, and accept the obligation	ons of Decilon dor Good, Florid	a otatate.	·-					
SIGNATURE	ature: typed or printed name of registered agent	and title if applicable (NOTE R	egistered Age	nt signature require	ed when reinstating)		BIAG		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGE	S TO OF	FICERS AND	DIRECTO	R\$ IN 12
TITLE D,	PT	☐ DELETE	11 TITLE					Change	Addition
NAME JÃ	QUINTO, ANTHONY		1.2 NAME						,
STREET ADDRESS 25	29 DEER RUN EAST		13 STREE	T ADDRESS					
CITY-ST-ZIP CL	EARWATER FL 33761		14 CITY-5	T-ZIP					
TITLE D		DELETE	21 TITLE					☐ Change	☐ Addition
NAME BF	rown, richard		22 NAME	ļ					
STREET ADDRESS 25	329 DEER RUN EAST		23 STREE	T ADDRESS					
CITY-ST-ZIP CL	EARWATER FL 33761		2.4 CITY -	ST-ZIP					
TITLE D,	VP, 5	☐ DELE1É	3: TITLE					Change	Addition
NAME M	arianne Jaquinto		3.2 NAME						
STREET ADDRESS 25	arianne Jaquinto 529 Beer Run East		33 STREE	T ADDRESS					ł
CITY-ST-ZIP CI	earwater F1-33761		34 CITY-	ST-ZIP				- <u>-</u> -	
TITLE	· · · ·	DELETE	41 TITLE					☐ Change	Addition
NAME			4 2 NAME						}
STREET ADDRESS			43 STREE	T ADDRESS					
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP				_	
TITLE		DELETE	5 1 TITLE					Change	☐ Addition
NAME			52 NAME						
STREET ADDRESS			n	T ADDRESS					
CITY-ST-ZIP			5.4 CHTY+5	IT-ZIP					
TITLE		☐ DELETE	6 I TITLE					Change	Addition
NAME			62 NAME						1
STREET ADDRESS			63 STREE	T ADDRESS					

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 | 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:

SIGNING OFFICER OR DIRECTOR