Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

\$8.75 Additional

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

DOCUMENT # P97000098141

Corporation Name

Suite, Apt. #, etc.

City & State

22

23

24

Zip

27

28

Zip

Suite, Apt. #, etc.

City & State

25 29 9. Name and Address of Current Registered Agent

Country

LOCKHART, KIMBERLY 7835 ELLIS RD W MEI BOURNE EL 3290

FILED
Apr 22, 1999 8:00 am
Secretary of State
04.00.1000.00145.014.***150.00

04-22-1999 90145 014 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Personal Property Tax.

82 Street Address (P.O. Box Number is Not Acceptable)

APPLIED FOR 59-3414 648

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

11/17/1997 4. FEI Number

	ELLIO NU							
W M	ELBOURNE FL 32904		8	3				
			8	4 City		FL	85 Zip	Code
office or re	to the provisions of Sections 607.0502 and 607. egistered agent, or both, in the State of Florida. In familiar with, and accept the obligations of, Se	Such change was au	ithorizea o	iv the corporati	poration submits this statement for ion's board of directors. I hereby	or the purpose of accept the appoir	changing its ntment as re	registered gistered
IGNATURE	Signature, typed or printed name of registered agent and title if app	(NOTE:	Registered An	ent signature require	ed when reinstating)	DATE		
2.	OFFICERS AND DIRECT		13.		ADDITIONS/CHANGES T	O OFFICERS AN	D DIRECTO	RS IN 12
TLE	D	DELETE	1.1 TITLE				Change	☐ Additio
AME I	LOCKHART, KIMBERLY		1.2 NAME	E				
	2414 SUMMERSET DRIVE			EET ADDRESS				
REET ADDRESS	MELBOURNE FL 32935		1.4 CITY-					
TY-ST-ZIP	D	☐ DELETE	2.1 TITLE			,	Change	Additio
	BEATTIE, RICHARD L		2.2 NAMI				-	
WE .	2414 CHAMEDOET DONE		1	EFT ADDRESS				
REET ADDRESS	MELBOURNE FL 32935		2. 4 CITY			-	•	
TY-ST-ZIP	WELDOURNE PL 32933	□ DELETE	3.1 TITLE	·	:		Change	☐ Additi
Ι	<u> 1</u>		3.2 NAMI					
WE.				ET ADDRESS				
REET ADDRESS	•		3.4. CITY		•			
TY-ST-ZIP		∩ DELETE	4.1 TITLE			-	Change	Additi
TLE		- 044212	4.2 NAM					_
AME				ET ADORESS				
REET ADDRESS								
TY-ST-ZIP		☐ DELETE	4.4 CITY- 5.1 TITLE				Change	☐ Additio
TLE		□ pereis	5.1 DILE	-			٥٠،٠٠٠٠ يى	
ME				EET ADDRESS				
REET ADDRESS			5.4 CITY	1				
TY-ST-ZIP		☐ DELETE	6.1 TITLE				☐ Change	Addit
TLE		[] NETELE	6.2 NAM					
AME (11.7)	AND CARLES OF THE OWN TO SERVICE OF THE SERVICE OF							
TREET ADDRESS	TO AN TO A STATE OF THE STATE O			EET ADDRESS				
πγ∙sτ∙zip '	A STATE OF THE STA	· · · · · · · · · · · · · · · · · · ·	6.4 CITY				47¢ - 45 - 4 45 - 1	

Country

81

30

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 attackment with an address, with all other like empowered.

SIGNATURE:

<u>.D___</u>

4-20-99

(407) 984-8555

Daytime Phone