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

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

04-22-1999 90183 015 ***150.00

r. Corporation	MENT # P97000° INECTIONS, INC.	108701			ë	
Principal Place	a of Rusiness	Mailing Address				- t reditieer tim takk lankt matte matte matte matte andet tott tomt detint tiet fant :
		-				
2578 BENTLEY DRIVE 2578 BENTLEY DRIVE PALM HARBOR FL 34684 PALM HARBOR FL 34684						
THEM THRIDON TO STOOT						DO NOT WRITE IN THIS SPACE
}						3. Date Incorporated or Qualifed 01/01/1998
2. Principal Place of Business						4. FEI Number Applied For
21 26						59-3486894 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired
22 27						
City & State						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23				ntry		
· ·				·uy		8. This corporation owes the current year Intangible Personal Property Tax.
24	9. Name and Address of Current		T			10. Name and Address of New Registered Agent
		<u> </u>		81	Name	
KUS, MAREK				82	Stroot Addes	ss (P.O. Box Number is Not Acceptable)
2578 BENTLEY DRIVE				82 Street Addres		iso (1.10), box (dulling) is not Accoptable)
PALI	M HARBOR FL 34684		Ī	83		
	•		}	84	City	85 Zip Code
			- 1	1	•	FL "
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 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 appointment as registered agent. I am familie with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Marek No. President April 16, 1999						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature						when reinstating) DATE 0
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	P / T	☐ DELETE	1.1 TITLE 1.2 NAME			Cusude Nadamui 4
NAME	Mater rus					
STREET ADDRESS	2570 Bentley Dive		1	1.3 STREET ADDRESS		آبا و ا
CITY-ST-ZIP	Falm nalout, EL Jaboa Delete		2.1 T(T)		ZIP	☐ Change ☐ Addition
	v / s	/ S				
NAME STREET ADDRESS	Ewa Kus				ADDRESS	
	2376 Bentiev Drive		2.4 CI		1	
CITY+ST-ZIP TITLE	Talm-Harbor, Pl. 34004 asiss		_	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NA	3.2 NAME		
STREET ADDRESS	DRESS 3.		3.3 STF	REETA	ADDRESS	
CITY-ST-ZIP	.		3.4. Cf	3.4. CITY-ST-ZIP		
TITLE	☐ DELETE 4.1		4.1 TIII	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NA	ME		İ
STREET ADDRESS	REET ADDRESS 4		4.3 STF	REETA	ADDRESS	\
CITY-ST-ZIP			_	4.4 CITY-ST-ZIP		
TITLE				5.1 TITLE		Change Addition
NAME			5.2 NA		1000500	\
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	51-27		_	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
TITLE				6.2 NAME		
NAME CTREET ADORESS	J		1		ADDRESS	
SINCE ADDRESS				A CITY-ST-ZIP		
CITY-ST-ZIP	j		37. 31			

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 SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-99

(727)7<u>85-4005</u>