PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	P98000005983
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FILED Apr 20, 1999 8:00 am Secretary of State

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1. Corporation	Name T P98000	1000983			
,	COUNT CARD CORPORAT	ION			,
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Principal Place	of Business	Mailing Address		I I DETICEDAT THE PETEN TOTAL DESIGN WHICH REPORT CONT. CONT. CONT.	
15319 PONDWO		P.O. BOX 270993			
TAMPA FL 3361		TAMPA FL 33688-0993			
				DO NOT WRITE IN THIS SPACE	
ł				3. Date Incorporated or Qualifed	
		1 m - 11 ''' - 11 - 1		01/20/1998 4. FEI Number Applied For	
2. Principal Pla	ace of Business	2a. Mailing Address		59-3489634 Not Applicable	
21 Suite, Apt. #	N ato	Suite, Apt. #, etc.		\$8.75 Additional	i
	•, euc.	27		5. Certificate of Status Desired Fee Required	- {
22 City & State		· City & State		6. Election Campaign Financing 55.00 May Be	
23		28		Trust Fund Contribution Added to Fees	- ;
Zip	Country .	_Zip	Country		
24	25	29	30	Personal Property Tax. ☐ Yes ☑ No	
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent	
B.400	N. DOUGLAG D		81 Name		
	ON, DOUGLAS R		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	9 PONDWOODS W Pa Fl 33618				ı
IAMP	A PL 33016		83		i
			84 City	FL 85 Zip Code	
		O 4 FOT 4 FOO Florida Statedo	- the above named on		
office or re	egistered agent, or both, in the State	of Florida. Such change was su	thorized by the corpora	orporation submits this statement for the purpose of changing its registered atton's board of directors. I hereby accept the appointment as registered	
Į.	n familiar with, and accept the obliga	nons of, Section 607.0505, Flori	da Statutes,	1	
SIGNATURE 5	Signature, typed or printed name of registered ages	nt and skie if applicable. (NOTE:	Registered Agent signature requ	uired when reinstating) DATE	8
12.		ID DIRECTORS	Registered Agent signature requ 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	1/98)
	O OFFICERS AN	ID DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	(11/98)_
12.	Douglas R. Bac	On President	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	034 (11/98)
12.	O OFFICERS AN	On President	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY- ST-ZP	Douglas R. Bac	on president dwoods W. 33618	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Douglas R. Bac ROMBNO 15319 Pond TAMPA FL Secretary	On President	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition	CR2E034 (11/98)
12. TITLE MANE STREET ADDRESS CITY-ST-ZP TITLE NAME	Douglas R. Back Reno 15319 Pone TAMPA FL Secretary	D DIRECTORS on president dwoods W. 336/8	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	CR2E034 (11/98)
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12. TITLE MANE STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP	Douglas R. Back Reno 15319 Pone TAMPA FL Secretary	D DIRECTORS on president dwoods W. 336/8 DELETE W. 336/8	13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	CR2E034 (11/98)
12. TITLE MANE STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE	Douglas R. Back Reno 15319 Pone TAMPA FL Secretary	D DIRECTORS on president dwoods W. 33618 DELETE	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	CR2E034 (11/98)
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12. TITLE MANE STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP CITY-ST-ZP CITY-ST-ZP CITY-ST-ZP	Douglas R. Back Reno 15319 Pone TAMPA FL Secretary	D DIRECTORS on president dwoods W. 336/8 DELETE W. 336/8	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	CR2E034 (11/98)
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12. TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Douglas R. Back Reno 15319 Pone TAMPA FL Secretary	DD DIRECTORS O N, President dwoods W. 336/8 DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZP 3.1 TITLE 3.2 NAME 3.9 STREET ADDRESS 3.4 CITY-ST-ZP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZP 6.1 TITLE 6.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition	(11/98)
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4. 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:

SMATURE AND TYPED OR PRINTED HAME OF BIONING OFFICER OR DIRECTOR

President

4-10-99 813-90

813-960-8280 Daytime Phone #