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 19, 1999 8:00 am Secretary of State

04-19-1999 90051 026 ***150.00

DOCUMENT #	Parananagaa

1. Corporation		700004					
BHADEN	TON ENDZONE, INC.		_	<u></u>) -00 (2) 00/0 1/01/0 (02/1	
- 							
Principal Place of Business Mailing Address					I BANK BENDA IBNA FRIN A	IUIII BIET 1861	
6708 36TH AVENUE DRIVE WEST 6708 36TH AVENUE DRIVE WEST							
BRADENTON FL 34209 BRADENTON FL 34209				DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualifed	THIS SPACE	
					• 01/27/1998		ļ
2. Principal Place of Business 2a. Mailing Address						Apr	olied For
21				4. 65-0812657	Not	Applicable	
		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	I
27		27			5. Certificate of Status Desired	Fee Re	quired
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	· 1
23	28				Trust Fund Contribution	Added to	o Fees
Zip			Countr	У	8. This corporation owes the current ye		£32No
24	9. Name and Address of Current	<u></u>	10)		Personal Property Tax. 10. Name and Address of New Regist		
	5. Name and Address of Current	registered Agent	8	1 Name			
, MCG	iuire, pratt, masio & farrano	CE, P.A.		2 04	(D.O. Day Mumber in Net Appendable)		
1001	3RD AVENUE WEST		8:	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
	E 600		8:	3			
BRA	DENTON FL 34205		8	4 City		85 Zip C	Code
			- 1	,		FL T]
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the abo	ve-named com	poration submits this statement for the purpo on's board of directors. I hereby accept the	se of changing its	registered sistered
agent. La	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	da Statute	s.	on a source of an exterior and a second are		,
. SIGNATURE					The state of the s	ATE	
12.	Signature, typed or printed name of registered agent of OFFICERS AND	``	13.	ent signature requir	ad when reinstating) DA ADDITIONS/CHANGES TO OFFICEF		RS IN 12
TITLE	P/S/D	DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	LEONARD T. TORRO	O	1.2 NAME	:			
STREET ADDRESS	4300 18th Street W		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP			1.4 CITY-	ST-ZfP			
TITLE	VP/T/D	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME			2.2 NAME	<u> </u>			
STREET ADDRESS	6708 36th Avenue Drive West 23		2.3 STRE	ET ADDRESS			ĺ
CITY-ST-ZIP	BLACEILOIL IOI IOA DEZOO		2. 4 CITY				☐ Addition
TITLE	•	☐ DELETE	3.1 TITLE			☐ Change	
NAME			3.2 NAME				i
STREET ADDRESS				ET ADDRESS			ļ
CITY-ST-ZIP		☐ DELETE	3.4. CITY 4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAMI	ı		_ ,	_
STREET ADDRESS				ET ADDRESS	÷		ļ
CITY-ST-ZIP			4.4 CITY-				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	,		5.2 NAME				
STREET ADDRESS			5.3 STRE	ET ADDRESS	_		
CITY-ST-ZIP	· · · · · ·		5.4 CITY-				
TIT) F		☐ DELETE	6.1 TITLE		-	☐ Change	☐ Addition

CITY-ST-ZIP 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 man attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

☐ Change