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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P98000009896

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

May 07, 1999 8:00 am Secretary of State

05-07-1999 90030 050 ***150.00

PENICK	AND WECK, INC.				
Principal Place		Mailing Address			
626 S. ECHO DRIVE 626 S. ECHO DRIVE BRANDON FL 33511 BRANDON FL 33511					
DHANDON 12 3	3377	Official Control of the Control of t			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					01/30/1998
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number
21		26			
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State			Ar 00
City & State	3	28			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible
24	25	29 3			Personal Property Tax.
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
			81	Name	e e
	NETT, STEPHEN G		82	Street	et Address (P.O. Box Number is Not Acceptable)
111 E. MASON STREET					
BRAI	NDON FL 33511		83		
			84	City	85 Zip Code
				·	FL 15 25 333
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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, broad or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE: R	13.	t signature r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OTTICERS AR	□ DELETE	1.1 TITLE	·/··	iange Addition
NAME	PENICK, JAMES		1.2 NAME		,
STREET ADDRESS	626 S. ECHO DRIVE		1.3 STREET	ADDRESS	s
CITY-ST-ZIP	BRANDON FL 33511		1.4 CITY-S		
TITLE	D	☐ DELETE	2.1 TITLE		.nge ☐ Addition
NAME	WECK, PETER III		2.2 NAME		
STREET ADDRESS	11325 113TH AVENUE		2.3 STREET	ADDRESS	s
CITY-ST-ZIP	SEMINOLE FL 34648		2. 4 CITY-S	T-ZIP	
TITLE		☐ DELETE	3.1 TITLE		D, P, 5
NAME			3.2 NAME		Connie Penick 626 S. Echo Dr
STREET ADDRESS			3.3 STREET	ADDRESS	s 626 s, Echo Dr
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	Brandon, A 33511
TITLE		☐ DELETE	4.1 TITLE		D, V, ≤ ☐ Change ☐ Addition
NAME			4. 2 NAME		KAYLA WECK
STREET ADDRESS			4.3 STREET	ADDRESS	\$ 11325 113 th AV
CITY-ST-ZIP '	- Completed		4.4 CITY-S	r-ZIP	Seminole, F1 34648
TITLE '		☐ DELETE	5.1 TITLE		Change Drawnon
NAME			5.2 NAME 5.3 STREET	AUUDEED	2.
STREET ADDRESS			5.4 CITY-S		"
CITY-ST-ZIP		DELETE	6.1 TITLE	- 41	Change Addition
TITLE			6.2 NAME		
NAME			6.3 STREET	ADDRESS	us

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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP