FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DUCUMEN I #	P9800001	3479					
R & R PROPERTIES	of tampa bay, in	C.	٠		i (Bâl) Bâu ha salai (âlii banii abini bâhii bâ	ar risse hert Glan	188+8 1811 18 8 1
Principal Place of Business		lailing Address				6) 11986 1 1111 4(9 11	10010 1811 1001
8621 WAGON TRAIL STE. 11 PORT RICHEY FL 34668		8621 WAGON TRAIL STE. 11 PORT RICHEY FL 34668		- =====================================	er.		
					DO NOT WRITE IN TH	S SPACE	
					3. Date Incorporated or Qualifed 02/11/1998		
2. Principal Place of Business		. Mailing Address			4 EEI Number	An	plied For
21	26	U			59-3496859		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 A	Additional
22		27			5. Certificate of Status Desired	Fee Re	quired
City & State	28	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	•
	Country	Zip	Country		This corporation owes the current year I		01003
24 25	29	. [3	_		Personal Property Tax.	_=	□No
	Address of Current Regis				10. Name and Address of New Registere	d Agent	
* CEONIANDEZ DANA			81 Na	me			
FERNANDEZ, RAYMOND A			82 Str	not Addre	ess (P.O. Box Number is Not Acceptable)		
8621 WAGON TRAIL STE. 11				eet Addie	(P.O. Box Humber is Not Acceptable)		
PORT RICHEY FL 3	4668		83				
			84 Cit			les Zin (
			184	у	F	_ 85 Zip C	2008
 Pursuant to the provisions office or registered agent, of agent. I am familiar with, ar 	r both, in the State of Flori	da. Such change was aut	horized by the o	ned corpo corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the control of the con	of changing its or pintment as rec	registered gistered
SIGNATURE							
Signature, typed or print	ed name of registered agent and title OFFICERS AND DIRE		egistered Agent signa	ture required		ND DIDEOTO	DO 101 40
TITLE PRESIDEN		DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition
		- VELETE	1.2 NAME	1		Gridings	
STREET ADDRESS 7013 WA	NANDEZ XWING DR.		1.3 STREET ADDR	Eee			
CITY-ST-ZIP NEW PORT	RICHEY FL. 3	34/53	1.4 CITY-ST-ZIP	E33			
	25100NT	DELETE	2.1 TITLE			Change	Addition
		= ,	2.2 NAME				
STREET ADDRESS 7013 1044	A. FERNANDO WIND DR.	C.	2.3 STREET ADDR	FSS			
CITY-ST-ZIP NEW PORT	RICHEM FL. 3	341.53	2.4 CITY-ST-ZIP			•	
TITLE	7	DELETE	3.1 TITLE	+		☐ Change	Addition
NAME			3.2 NAME	1	•	_ •	
STREET ADDRESS			3.3 STREET ADDR	ESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE	 	☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME			-	
STREET ADDRESS			4.3 STREET ADDR	ESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP				*
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADOR	ESS			İ
CITY-ST-ZIP			5.4 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

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

Change

☐ Addition