PROFIT CORPORATION ANNUAL REPORT

1. Corporation Name



DOCUMENT # P98000026891

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90168 012 ***150.00

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Principal P acc	e of Business	Mailing Address				E 64 51 G 67 11 E 8 11 E	HÇIV BILVI IŞİL	1\$181 FI\$1 (E\$1
5740 ABSHIRE BLVD. BELLVIEW FL 34420		5740 ABSHIRE BLVD. BELLVIEW FL 34420		DO AIGT IV	DITC IN TUR	SBACE		
						RITE IN THIS	SPACE	.
					3. Date Incorporated or Qualife 03/19/1998	eu		
2 Principal D	lace of Business	2a. Mailing Address			4, FEI Number		- An	[lied For
—	INCE OF DUSINESS	26			165-08376	76		t Applicable
Suite, Act.	# etc.	Suite, Apt. #, etc.			45 00520	<u> </u>	\$8.75	
22		27			5. Certifcate of Status Desired		Fee Re	
City & Stat	e	City & State			6. Election Campaign Financing	9 🗖	\$5.00	May Be
23		28			Trust Fund Contribution	" [□]	Added t	
Zip	Cour try	Zip	Country	у	8. This corporation owes the cu	urrent year int	angible	
24	25	29	30		Persor al Property Tax.		Yes	[]No
	9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New	Registered	Agent	
COUEY, CLIFFORD M 5740 ABSHIRE BLVD. BELLVIEW FL 34420			81	l Name				
			82	Street Acd	ress (P.O. Box Number is Not Acceptable)			
								
Dt:Li	LVILTT FL 3442U		83	'				
			84	City			85 Zip (Code
			ļ	Į.		FL	<u> </u>	
office or r agent. a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was a	authorized by	/ the corporati	poration submits this statement for the constant of cirectors. I hereby acc	ne purpose of cept the appor	changing its ntment as re	registered gistered
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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 cc rtify that the information indicated on this annual report or supplemental a nual 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 organ attachment with an address, with all other like empowered.

SIGNATURE: