SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P98000027805

in Block 12 or Block 13 if changed, or on an attachment with an address.

PLAZA ON THE PARK, INC.

Principal Place of Business 13144 PARK BOULEVARD STE. C SEMINOLE FL 33776

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

26

13144 PARK BOULEVARD STE. C SEMINOLE FL 33776

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90126 045 ***150.00 08-04-1999 90011 042 ***550.00



Applied For

\$8.75 Additional

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/25/1998 4. FEI Number

City & State St	Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Zip			27	<u>.</u>		Fee Required
Zip	一 , ・	9	⊢ ′		,	¥
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City 85 Zip Code 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 submits this statement for the purpose of changing its registered office or registered agent and accept the obligations of, sections 607.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent and accept the obligations of, section 607.0505, Florida Statutes, the above-named of directors. I hereby accept the appointment as registered office or registered agent and itself applicable. 81 Name 81 Name 12 OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 ITIE 9 DELETE 13 TIME 9 DELETE 13 TIME 14 OFFICERS AND DIRECTORS IN 1 ITIE 15 NAME 15 NAME 16 Name and Address of New Registered Agent 82 Ziprent Address (P.O. Box Number is Not Acceptable) 83 Ziprent Address (P.O. Box Number is Not Acceptable) 84 City 85 Zip Code 15 Name authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent and title if agriculture age		Country	Zip	Country	8. This corporation owes the current	t year
10. Name and Address of Current Registered Agent 10. Name and Address of Now Registered Agent 10. Name 10.	24	25	29	30	Intangible Personal Property.	
DIVITO, JOSEPH A 4514 CENTRAL AVENUE ST. PETERSBURG FL 33711 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City		9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
## City ## FL 85 Zip Code 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 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, 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, 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, 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, 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, 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, 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, or both, in the provision, agent, and the Provision agent, and the Provision agent, and the Provision agent agent and the Provision agent and the Provision agent agent and the Provision				81 Name		
## City ## FL 85 Zip Code 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 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, 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, 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, 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, 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, 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, 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, or both, in the provision, agent, and the Provision agent, and the Provision agent, and the Provision agent agent and the Provision agent and the Provision agent agent and the Provision	,,,,DIVI	TO, JOSEPH A	THE PARTY SERVICE	Street Addr	non (P.O. Ray Number is Not Accentah	20
## City ## FL 85 Zip Code 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 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, 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, 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, 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, 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, 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, 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, or both, in the provision, agent, and the Provision agent, and the Provision agent, and the Provision agent agent and the Provision agent and the Provision agent agent and the Provision	4514	4 CENTRAL AVENUE		Sileet Addi	ess (F.O. Box Number is Not Acceptable	•
### 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 at the collisions of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	ST.	PETERSBURG FL 33711		83		
### 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 at the collisions of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable.						
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE 12.				84 City		FL 85 Zip Code
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE 12	11. Pursuant	to the provisions of sections 607.0502	and 607.1508, Florida Statutes	, the above-named corpo	ration submits this statement for the purp	ose of changing its registered
SIGNATURE SIGN	office or r	registered agent, or both, in the State o	if Florida. Such change was aι	uthorized by the corporation	on's board of directors. I hereby accept	ne appointment as registered
Signature, typed or printed name of registared agent and tilbs if applicables. (NOTE: Registered agent agent and pagent agent and tilbs if applicables. (NOTE: Registered agent and pagent agent and tilbs if applicable. (NOTE: Registered agent agent and tilbs if applicable. (NOTE: Registered agent agent and tilbs if applicable. (NOTE: Registered agent		an anna ma, and accept the obligation	0115 01, 0001011 007.0000(7.101			
DELETE D	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	TE: Registered Agent signature requ		
NAME	12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
STREET ADDRESS 13144 PARK BLVD. STE. C SEMINOLE FL 33776	TITLE	D	DELETE	1.1 TITLE		Change Addition
SEMINOLE FL 33776	NAME	BICKEY, MINDY		1.2 NAME	en in english and the second	-
TITLE NAME BICKEY, NICHOLAS STREET ADDRESS 13144 PARK BLVD. STE. C SEMINOLE FL 33776 17TLE NAME STREET ADDRESS CITY-ST-ZIP 17TLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 17TLE NAME STREET ADDRESS CITY-ST-ZIP 17TLE DELETE DELETE 1.1 TITLE 1.2 LACTY-ST-ZIP 17TLE 1.3 TITLE 1.4 TITLE 1.5 T	STREET ADDRESS	13144 PARK BLVD. STE. C		1.3 STREET ADDRESS		
TITLE D DELETE 2.1 TITLE Change Add NAME BICKEY, NICHOLAS 2.2 NAME	CITY-ST-ZIP	SEMINOLE FL 33776		1.4 CITY-ST-ZIP		
NAME STREET ADDRESS 13144 PARK BLVD. STE. C 23 STREET ADDRESS 24 CITY-ST-ZIP		D	DELETE	2.1 TITLE		Change Addition
STREET ADDRESS 13144 PARK BLVD. STE. C 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	NAME	BICKEY, NICHOLAS		2.2 NAME		_
DELETE DELETE 3.1 TITLE Change Add A		-		2.3 STREET ADDRESS		
TITLE				2.4 CITY-ST-ZIP		
NAME			DELETE	_		Change Addition
STREET ADDRESS		•		3.2 NAME		
CITY-ST-ZIP	1					
TITLE						
NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP	+	1. 1-m	T DEFETE			Change Addition
STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP			III DELETE			LI STORING CI AMMONT
CITY-ST-ZIP						•
TITLE DELETE 5.1 TITLE Change Add NAME 5.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP CITY-ST-ZIP						
NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP			Пене			Change Addition
STREET ADDRESS CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			☐ DEFF LE			Change Addition
CITY-ST-ZIP 5.4 CITY-ST-ZIP	1					
				6.1 TITLE		Change D &ddistan
	TITLE		L DELETE	1		Change Addition
NAME 6.2 NAME						
STREET ADDRESS 6.3 STREET ADDRESS	[<u> </u>	والمحار وريونين ميحين الأ	~ _	المادك منه من المستنب	
CITY-ST-ZIP 6.4 CITY-ST-ZIP		<u> </u>			440 07(0)() Flaids Statutes 15.44	or contifut that the information
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	indicated o	on this annual report or supplemental a	nnual report is true and accura	ate and that my signature	shall have the same legal effect as if m	ade under oath: that I am