PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90202 043 ***150.00

2415 FALCON LANE PALM HARBOR FL 34683	
2a. Mailing Address	
	_
 1	
City & State	
28	
Zip Country	
29 30	
	Suite, Apt. #, etc. 27 City & State 28 Zip Country

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Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

3. Date Incorporated or Qualifed

59-3504374

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

82 Street Address (P.O. Box Number is Not Acceptable)

04/08/1998 4. FEI Number

CORAL GABLES FL 33134										
			84	City		85 Z	ip Code			
				•	FL	1	·			
 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, typed or printed name of registered agent and title if applicable.	(NOTE: Ragin	nenA Agen	at signatura r	equired when reinstating) DATE		\			
12.	OFFICERS AND DIRECTORS		13.	it digitation	ADDITIONS/CHANGES TO OFFICERS AN	DIREC	TORS IN 12			
rmle	<u> </u>		1.1 TITLE			Chan	ge Addition			
NAME	PETTAY, JEFFREY A		1.2 NAME				}			
STREET ADDRESS	2415 FALCON LANE		1.3 STREET	ADDRESS			ļ			
CITY-ST-ZIP	PALM HARBOR FL 34683		1.4 CITY-ST	T-ZIP			}			
TITLE			2.1 TITLE			Chan	ge Addition			
NAME	PETTAY, JACKELYN A		2.2 NAME							
STREET ADDRESS	2415 FALCON LANE		2.3 STREET	ADDRESS	· · · · · · · · · · · · · · · · · · ·	- -	-			
CITY-ST-ZIP	PALM HARBOR FL 34683	1	2. 4 CITY+S	T-ZIP						
TITLE		DELETE	3.1 TITLE			☐ Chan	ge			
NAME			3.2 NAME							
STREET ADDRESS	'	1	3.3 STREET	ADDRESS			Ì			
CITY-ST-ZIP		_	3.4. CITY-S	T-ZIP						
TITLE		DELETE	4.1 TITLE			Chan	ge 🗌 Addition			
NAME			4.2 NAME							
STREET ADDRESS			4.3 STREET	ADDRESS			l			
CITY-ST-ZIP		_	4.4 CITY-S	T-ZIP						
TITLE		☐ DELETÉ	5.1 TITLE			Chan	ge Addition			
NAME			5.2 NAME		•					
STREET ADDRESS			5.3 STREET	ADDRESS			ļ			
CITY-ST-ZIP、、	Mr. Charles of Mr. Mary B. Co.		5.4 CITY-ST	T-ZIP						
MILE 333	MARINE GERMAN		6.1 TITLE			☐ Chan	ge Addition			
LIABET	EFF - AFF LATE - MAT AFF MED TO LINE SECTION OF THE SECTION OF TH	E .	6.2 NAME							
STREET ADDRESS	(a) - 57 - 1844.	1	6.3 STREET	T ADDRESS			~			
CITY+ST+ZIP .			6.4 CITY-S							
44 Ibarabu a	partiful that the information expedied with this filing doce	not qualify for the	evemnti	ion stater	t in Section 119.07(3)(i) Florida Statutes. I further cert	ırv that ti	ne information			

I receive certary treat the information supplied with rins mang does not quality 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.

SIGNATURE: