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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000032829

1. Corporation Name

5215 DEVELOPMENT INC

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90198 050 ***150.00

52 15 DE	VELOFIVIENT, INC.					
Principal Place	e of Business	Mailing Address		F INNEHOUS III INIHI POTII GOIIT ON		11 [] [] [] [] [] [] [] [] [] []
5215 N. LOIS A		5215 N. LOIS AVE.				
TAMPA FL 33813 736/4 TAMPA FL 33816 736/4			14	DO NOT WRIT	TE IN THIS SPACE	
	•			3. Date Incorporated or Qualifed		
				04/09/1998		
2. Principal P	lace of Business	2a. Mailing Address	 	4. FEI Number	Apı	plied For
21	· • • • ·	26		59-3516130	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A	I .
22		27		5. Certificate of Otolog Besides	Fee Re	quired
City & State	е	City & State		6. Election Campaign Financing	\$5.00	
23	<u> </u>	28		Trust Fund Contribution	Added to	o Fees
Zip .	Country	Zip	Country	8. This corporation owes the curre		mu.
24	25	29	30	Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent	Od Name	10. Name and Address of New R	egistered Agent	
IACT	DEDOON MADE D		81 Name			
	PERSON, MARK D		82 Street Ad	dress (P.O. Box Number is Not Accepta	ible)	
450 75TH AVE. ST. PETE BEACH FL 33706						
31.1	PETE DEACH FL 33/00		83			
			84 City		85 Zip C	Code .
					FL "	
					number of changing its	registered I
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statut	es, the above-named co	progration submits this statement for the pation's board of directors. I hereby accep	of the appointment as rec	gistered
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a	uthorized by the corpora	orporation submits this statement for the ation's board of directors. I hereby accep	t the appointment as rec	gistered
office or re agent. I a	egistered agent, or both, in the State	of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized by the corpora rida Statutes.	ation's board of directors. I hereby accep	n the appointment as ret	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 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: