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FILED Mar 24, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
IVISION OF CORPORATIONS

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| } | | | | | | | | 3. Date Incom | orated or Qualife | d | | } |
| | | | | | | | | 04/22/19 | | | | |
| 2. Principal F | Place of Business | | 2a. Mailing A | \ddress | | | | 4. FEI Numbe | 34179 | 30 | | plied For |
| 21 | | | 26 | | | | | 1 37 | 3711/- | <u> </u> | | 1 Applicable |
| Suite, Apt | t. #, etc. | | Suite, Ap |)l. #, e1C. | | | | 5. Certificate of | f Status Desired | | \$8.75 A | |
| 22 City & Sta | ato | | 27 City & S | ate. | | | | 6' Election Ca | mpaign Financin | | \$5.00 | |
| 23 | | | 28 | | | | | 1 | Contribution | • 🗆 | Added t | |
| Zip | C | ountry | Zip | | Coun | itry | | 8. This corpor | ation owes the co | irrent year in | | |
| 24 | 25 | | 29 | 3 | 0 | | | | roperty Tax. | | Yes | □No |
| | 9. Name and A | Address of Current | Registered Age | ent | | 81 N | lame | 10. Name and | Address of New | Registered | Agent | |
| GAI | LARIS, SEAN D | | | | [| | | | | | | |
| | O GULF BLVD | | | |] | 82 S | treet Addre | ess (P.O. Box Nur | nber is Not Acce | otable) | | 1 |
| | PETERSBURG FL | . 33706 | | |); | 83 | | | | | | |
| | | | | - | Ļ | <u>. -</u> | V4 | | | | 85 Zip (| ode |
| | | | | | 1 | 84 C | lity | | | FL | - `` | |
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| 11. Pursuant | t to the provisions of | Sections 607.0502 | and 607.1508, f | lorida Statutes | the ab | OVO-N | emed corpo | oration submits thi | s statement for the | ne purpose of real the appo | i changing its intrent as rec | registered |
| 11. Pursuant office or agent. I | registered agent, or am tamiliar with and | f Sections 607.0502 in both, in the Stafe of discoupt the obligation | and 607,1508, f Florida. Such cons of, Section 6 | Florida Statutes hange was aut 507,0505, Florid | the ab horized ta Statu | ove-ru by the tes. | emed corporation | oration submits thi on's board of direct | s statement for thors. I hereby acc | epi ine appo | ingheni as ig | 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 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 each; 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:

WHE AND THE OF HOUTED HAVE OF HOUSE OFFICER OR DIRECTOR

3/20/49

727 559 0400 Daytime Phone #