PROFIT
CORPORATION
NNUAL REPORT

1999

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FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State 👡 **DIVISION OF CORPORATIONS** 

**DOCUMENT #** P98000039456

ECONOMY TWENTY, INC.

Principal Place of Business

14648 VILLAGE GLEN CIRCLE

Mailing Address

14648 VILLAGE GLEN CIRCLE

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

REINSTATEMEN	ACE GO
Date tree-seried or Ovelified	

TAMPA FL 33624-2709	TAMPA FL 33624-2709		REINS LA ENENJACE	
			3. Date Incorporated or Qualified 04/27/1998	Face of Value
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied 🔂 🔭
21 13170 N. 19th St.		9th St. #1	02 59-3509293	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Tampa, FL	27 Tampa, FL			
City & State 33613	City & State 28 33613		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	28 33613 Zip	Country	8. This corporation owes the current year	<del></del>
-, ·	<b>├</b> ── }-	30	Intangible Personal Property.	Yes No
- ·	Current Registered Agent	301	10. Name and Address of New Register	ed Agent
		81 Name		
WHITNEY, FRANK C SR.	_	82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	•
14648 VILLAGE GLEN CIRCLI	E	02 311661 A		
TAMPA FL 33624-2709		83		
		84 City		85   Zip Code
$\wedge$			F	FL   "
11. Pursuarit to the provisions of sections 6 office of registered agent, or both, in the agent. Ham familiar with, and accept the SIGNATURE Signature, typed or printed name of registered.	le State of Florida. Such change (##s at le abligations of section 607.0505; Flor	ithorized by the corporida Statutes.  TE: Registered Agent signature		pointment as registered
12. OFFICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE D	DELETE	1,1 TITLE	S Toff Danner	Change XX Addition
NAME WHITNEY, FRANK C SE		I.C INCHE	Jeff Denny	
STREET ADDRESS 14648 VILLAGE GLEN (	CIRCLE		13710 N. 19th St.	
CITY-ST-ZIP TAMPA FL 33624-2709			Tampa, Fla. 33613	
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS	<u> </u>	2.3 STREET ADDRESS		<del></del>
CITY-ST-ZIP		2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE	L DELETE	3.2 NAME	والمراجع المنافر	<b>—</b> · · —
NAME		3.3 STREET ADDRESS	200003081 -01/04/00-	(492 r
STREET ADDRESS		3.4 CITY-ST-ZIP		-01063008 <u>}****750_00</u>
CITY-ST-ZIP TITLE	DELETE	4.1 TITLE	<del></del>	Change Addition
NAME		4.2 NAME		_
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	U. ddah Alair Elian da	6.4 CITY-ST-ZIP	section 119.07(3)(i), Florida Statutes. I further cen	tify that the information
14. I nereby certify that the information suppl	iled with this filling goes not quality for th	e exemplion stated in s	SECTION (18.07(3)(1), FIORDS STATUTES, FRUITIEF CEN	ary arat trio milorification

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 anettachment with an address.