PROFIT CORPORATION ANNUAL REPORT 4000



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 90002 043 ***150.00

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DOCUI	MENT # P98000	0042608			
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Principal Place	•	Mailing Address	_		
14245 RIDGE M RIDGE MANOR		34245 RIDGE MANOR BLV(RIDGE MANOR FL 33523	0.		
				DO NOT WRITE IN TH	HIS SPACE
				3. Date incorporated or Qualifed 05/08/1998	
Principal Pl	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
5041	TREIMAN BIVD		<u>bul&aamis</u>	l. 59- <i>3</i> 52 <i>5</i> 394	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		27 City & State		6 Election Campaign Financing	\$5:00 May Be
Dade	e City, Fl	28 Dade City	s EL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible ☐Yes ⊠ No
13357	23 Hernando 9. Name and Address of Curren		30 Hernand	O Personal Property Tax. 10. Name and Address of New Register	
		K HOMESTED AND IN	81 Name	11	
	DRAN, DAVID			ress (P.O. Box Number is Not Acceptable)	
34245 RIDGE MANOR BLVD.			50		<u> </u>
	E MANOR FL 33523		83		
HIDG					
HIDG	•		84 City	O	85 Zip Code
	to the applications of Contlant 607.050	2 and 607 1508 Florida Statut	1 1 7	Sade City F	L 22523
-	to the provisions of Sections 607.050; egistered agent, or both, in the State	2 and 607.1508, Florida Statut of Florida, Such change was a	1 1 7		L 22523
Pursuant office or nagent. I a	to the provisions of Sections 607.050; egistered agent, or both, in the State in familiar with, and accept the obligat	2 and 607.1508, Florida Statut of Florida. Such change was a titions of, Section 607.0505, Flor	1 1 7	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	L 22523
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I nelegy carrier that the thormation supplied with tors hing does not quality tor, the exemption scaled in Social 13.07(3/o), Ponda Statutes, the additional indicated on this annual report or supplemental annual report is true and accorate 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 experience trustee ampowered to execute the report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE/