

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 16, 1999 8:00 am
Secretary of State

09-16-1999 90010 027 ***550.00

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000043030**

1. Corporation Name

RABBITT DANCIN' INC.

Principal Place of Business
**13507 CLUBSIDE DRIVE
TAMPA FL 33624**

Mailing Address
**13507 CLUBSIDE DRIVE
TAMPA FL 33624**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1998

2. Principal Place of Business

21 **820 Patricia Ave**

Suite, Apt. #, etc.

22 **103**

City & State

23 **Dunedin Florida**

Zip

24 **34698**

Country

25 **USA**

2a. Mailing Address

26 **820 Patricia Ave**

Suite, Apt. #, etc.

27 **103**

City & State

28 **Dunedin Florida**

Zip

29 **34698**

Country

30 **USA**

4. FEI Number

59-3520148

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year

Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**HALES, MICHAEL
13507 CLUBSIDE DRIVE
TAMPA FL 33624**

10. Name and Address of New Registered Agent

81 Name **Michael Hales**
82 Street Address (P.O. Box Number is Not Acceptable)
820 Patricia Ave
83 **103**
84 City **Dunedin** FL 85 Zip Code **34698**

11. 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: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **HALES, MICHAEL**
STREET ADDRESS **13507 CLUBSIDE DRIVE**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **MICHAEL HALES**
1.3 STREET ADDRESS **820 Patricia Ave #103**
1.4 CITY-ST-ZIP **Dunedin, FL 34698**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

M. S. Dancin' Inc. President Rabbitt Dancin' Inc 9/11/99

CR2E034 (5/99)