PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000047146 1. Corporation Name

FILED Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90156 007 ***158.75



Principal Plac 1098 PARK DR CASSELBERRY	l	Mailing Address 1098 PARK DR CASSELBERRY FL 32707			DO NOT WRITE 3. Date Incorporated or Qualifed 05/22/1998		PACE		
2 Principal B	Place of Rusiness	2a. Mailing Address			4. FEI Number		Apr	lied For	
2. Principal Place of Business 2a. Mailing Address 21 26					59-33377	48		Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 A	dditional	
22 27					5. Certificate of Status Desired	Ж	Fee Red	quired]
City & State City & State					6. Election Campaign Financing		\$5.00	May Be	Ì
23 28			_		Trust Fund Contribution	<u> </u>	Added to		ļ
Zip	Country	Zip	Country		# 8. This corporation owes the curre			-	,=
24	25	29 30	0		Personal Property Tax.			□No	
	9. Name and Address of Current	Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered Ag	ent		
	LADD MEDIAND D		81	Name					Ì
	LARD, MERLAND D		82	Street Add	ress (P.O. Box Number is Not Acceptab	ole)			
	8 PARK DR		100						l
CAS	SSELBERRY FL 32707		83						}
{			84	City		FI	85 ZIp C	ode	
<u> </u>		1007 A500 50-11- Classes				• - 1	ancino ita r	enistered	1
office or r	registered agent, or both, in the State o am familiar with, and accept the obligation	f Florida, Such change was authors of Section 607 0505. Florida	norized by	the corporation	poration submits this statement for the p ion's board of directors. I hereby accept	the appointm	nent as reg	istered	
		0113 61, 000,0011 001.0000, 1 10110	o ontolog	•					
SIGNATURE					ed when reinstaling)	DATE			89
		and life if applicable. (NOTE: Re	egistered Agen		ed when reinstaling) ADDITIONS/CHANGES TO OFF	ICERS AND			1/98)
SIGNATURE 12, TITLE NAME STREET ADDRESS	Signature, typed or profed name of registered agent OFFIGERS AND IRES, Lewis	and tide if applicable. (NOTE: Red DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	nt signature require		ICERS AND	DIRECTOR	RS IN 12	RZE034 (11/98)
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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.

6.4 CITY-ST-ZIP