PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 07, 1999 8:00 am Secretary of State

05-07-1999 90167 021 ***150.00

DOCUMENT # P98000047783

1. Corporation Name

P.S. PIETY, INC.

Principal Place of Business

Mailing Address

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1601 BARRY ROAD CLEARWATER FL 33756	1601 BARRY ROAD CLEARWATER FL 33756				
OLEANWAILH IL 30/30	OLLAIMA. EN 12 SOISO		DO NOT WRITE IN THIS SPACE		
			Date Incorporated or Qualifed		
			05/28/1998		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 59-35/8534 Applied For		
21 1601 BARRY RA	26 1601 BARRY 1	Ud.	Not Applicable		
Suite, Apt. #, etc. 22 (LEARCWSTER, FL	Suite, Apt. #, etc. 27 AMALIENTER	5/.	5. Certifcate of Status Desired \$8.75 Additional Fee Required		
City & State 23 Moled A	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country		ountry	This corporation owes the current year Intangible		
24 33756 25 USA.		11.51			
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
STEELE, AUSON M		81 Na	Name		
535 CENTRAL AVENUE ST. PETERSBURG FL 33701		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 Cit	FL 85 Zip Code		
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					

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition ☐ DELETE TITLE 11 TITLE PIETY, PATRICIA S 1.2 NAME NAME 1601 BARRY ROAD 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 33756** CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE ☐ Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE NAME 4.2 NAME 4,3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZiP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP .

717) 443-5539

CR2E034 (11/98