## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000055060 1. Corporation Name

PEERLESS, INC.

Principal	Place of	Business

Mailing Address

## **FILED** Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90026 041 \*\*\*150.00



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3524 HARWICH COURT LAKE WORTH FL 33467	3524 HARWICH COURT LAKE WORTH FL 33467				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
					06/19/1998	
2. Principal Place of Business	2a. Mailing Address				4 EEI Number Applied For	
4)	26				65-0846416 Not Applica	ble
Suite, Apt. #, etc.	Suite, Apt. #, etc	L			5. Certificate of Status Desired	J
2	27			<u> </u>	5. Certificate of Status Desired	
. City & State	City & State				6. Election Campaign Financing \$5.00 May Be	
3	28				Trust Fund Contribution Added to Fees	
Zip Country	Zip	Cou	ntry		This corporation owes the current year Intangible	
4 25	29	30			Personal Property Tax. Yes No	
9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered Agent	
		*	81	Name		
Warren, andrea			82	Charact Address	ess (P.O. Box Number is Not Acceptable)	
3524 HARWICH COURT			82	Street Addre	ess (F.O. Box Number is Not Acceptable)	
LAKE WORTH FL 33467			83			
					85 Zip Code	
•			84	City	FL   S   Z   COURT	
			1 1	l		

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: Rec	gistered Agent signature re	equired when reinstating)	ATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	D	DELETE	1.1 TITLE	President	Change	Addition
NAME	WARREN, ANDREA		1.2 NAME	And worren		
STREET ADDRESS	3524 HARWICH COURT		1.3 STREET ADDRESS	3:	162	
CITY-ST-ZIP	LAKE WORTH FL 33467		1,4 CITY-ST-ZIP			F-7 - 1 Hd
TITLE	D	DELETE	2.1 TITLE	vice President	[⊒∕Change	Addition
NAME	SHOOT, BARRY		2.2 NAME	Bush Shoots p	CAPT. 5	ĺ
STREET ADDRESS	5795 LA PASEOS DRIVE APT. B-1		2.3 STREET ADDRESS	<b>3</b>	• •	-
CITY-ST-ZIP	LAKE WORTH FL 33463		2. 4 CITY-ST-ZiP	1. Willingth	_33''	
TITLE	D	☐ DEFELE ¯	3.1 TITLE	Secretary of	: Change	Addition
NAME	WARREN, LINDA		3.2 NAME	Treasurer		1
STREET ADDRESS	3524 HARWICH COURT		3.3 STREET ADDRESS		,	`
CITY-ST-ZIP	LAKE WORTH FL 33467		3.4. CITY-ST-ZIP			
TITLE		□ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME	• .		4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	1 1 <sub>100</sub>	☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME	3,1		5.2 NAME			
STREET ADDRESS	_		5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			☐ Addition
TITLE	•	DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS		Ì	6.3 STREET ADDRESS			
CITY-ST-ZIP	•		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, with all other like empowered.

SIGNATURE: