PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90087 046 ***150.00

 Corporation 	MEN # P98000(IN ALLSTATE TRAFFIC SCH										
Principal Place			alling Address	12			1 (550) 10 (50) 15 (50) 55 (50)				
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0/10/10/07/							Date Incorporated or Qualifed	E IN This c	DFACE	•	1
							07/06/1998				(
	f D. classes	2a.	Mailing Address				4. FEI Number		I.A	pplied For	1
<u> </u>	ace of Business	26	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						ΧN	ot Applicable]
Sulte, Apt. i	#. etc.	120,	Suite, Apt. #, etc.		***************************************		5. Certificate of Status Desired		+	Additional	
22		27					5. COMMON OF THE PARTY OF THE P			beriupe	}
City & State			City & State				8. Election Campaign Financing	-[]		May Be to Fees	}-
23		28	-=				Trust Fund Contribution	-t was late			1
Zip	Country		Zip	30	Intry		This corporation owes the curre Personal Property Tax.		☐ Yes	No	١
24	25 9. Name and Address of Current	29		[30]	T		10. Name and Address of New Ro	egistered A	gent		1
	9. Name and Address of Corten	regis	(tores regent		81	Name					Į
UND	ERWOOD, KENNETH L				82	Street Add	ress (P.O. Box Number is Not Accepta	hie)		<u></u>	1
105 ARBOR VIEW CT					02	SEAR! WITH	1858 (F.O. DOX HOHEDE) O 1011 1000 P.C.				1
PON	te vedra beach Fl 32082 🔍				83						
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11. Pursuant office or nagent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	and 6 of Floric ions of	07.1508, Florida Statut da. Such change was a Section 607.0505, Flo	tes, the a outhorized orida Stat	bove- d by th tutes.	named corp ne corporation	poration submits this statement for the jon's board of directors. I hereby accept	t the appoin	zrangung n ibnent as (egistered	İ
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SIGNATURE			WOTE	· Danielare	ولنستده	eignature teculos	ed when reinstating)	DATE			ءا
	Signature, typed or printed name of registered agent	and title				tignature require	ad when reinstating) ADDITIONS/CHANGES TO OFF		D DIRECT	ORS IN 12	8
12.	OFFICERS AND	D DIRE	CTORS DELETE	. 13.		tignature require	nd when reinstating) ADDITIONS/CHANGES TO OFF		D DIRECT		(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 turner certify that I am an 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 sector or trustee employeered 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 at attachingent with an actives, with all other-like employment.

SIGNATURE: