**PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P9800060733



Principal Place of Business Mailing Address	
8401 JR MANOR DRIVE 8401 JR MANOR DRIVE	
SUITE 100         SUITE 100         DO NOT WRITE IN THIS SPACE           TAMPA FL 33634         DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified	
07/07/1998	
2 Principal Place of Business 2s. Mailing Address 4. FEI Number Appl	lied For
	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Ad	
22 S. Certificate of Status Desired Tree Req	uired
City & State 6. Election Campalgn Financing \$5.00 N	
23 Trust Fund Contribution Added to	Fees
Zip Country Zip Country 8. This corporation owes the current year intangible	ا
[24] [25] [29] [30] [40.00000000000000000000000000000000000	⊒No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
PRINCE, RANDELL L. 182 Street Address (P.O. Rox Number is Not Acceptable)	
8401 JR MANOR DRIVE  82 Street Address (P.O. Box Number is Not Acceptable)  SHUMPLER, LOOP & KENDRICK	
OHU IN MARION UNIVE SHUMAKER, COOP'S KENDRICK	
SUITE 100 TAMPA FL 33634  83 LOI E. KENNEDY BUYD # 2800	]
84 City 85 Zip Co	ode
	-0Z
	J
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 re- 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 explication.  [NOTE: Registered Agent aignature required when refrestating)]  DATE	
SIGNATURE  Signature, typed or printed name of registered agent and tile if applicable. [INOTE: Registered Agent aignature required when relinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	S IN 12
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Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. It ruther 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:

BIANDITURE JACOB ISDACEZ