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 # **P98000060877**1. Corporation Name

LAUNCHPAD, INC.

Principal Place of Business 130 W UNION ST

PASADENA FL 91103

Mailing Address

130 W UNION ST PASADENA FL 91103

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90158 015 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

07/09/1998

2. Principal P	pal Place of Business 2a. Mailing Address				4. FEI Number Applied For	
	130 W. UNION ST 26 130 W. UNION		Not	ST.	95-4696063 Not Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
27					5. Certificate of Status Desired Fee Required	
City & State City & State			-		6. Election Campaign Financing S5.00 May Be	
23 PASADENA, CA 28 PASADENA, C			, CA		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible	
24 9110	3 25 USA	29 91103 3	0		Personal Property Tax. ☐ Yes 🔼 No	
	9. Name and Address of Current		1		10. Name and Address of New Registered Agent	
81						
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION FL 33324				82 Street Address (P.O. Box Number is Not Acceptable)		
				83		
			84	City	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						
I 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 broad or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	it signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OFFICERS AND	DELETE	1.1 TITLE		PRESIDENT Change Addition	
		_ octo	1.2 NAME	'	BILL GROSS	
NAME					130 W. UNION ST	
STREET ADDRESS				ADDRESS	PASADENA ICA 91103	
CITY-ST-ZIP		☐ DELETE	1.4 CITY-S			
TITLE		☐ DELETE	2.1 TITLE		MAZZIA GOOSI VIA 2	
NAME			2.2 NAME		SECRETARY.	
STREET ADDRESS					130 W. UNION ST	
CITY-ST-ZIP			2. 4 CITY-S	ST-ZIP	PASADENA. CA 91103	
TITLE	☐ DELETE 31T		3 1 TITLE		Change C Addition	
NAME			3.2 NAME	1		
STREET ADORESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CfTY-S	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4, 2 NAME		}	
STREET ADDRESS			4.3 STREE	TADDRESS	!	
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME		}	
STREET ADDRESS			5.3 STREE	TADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME		!	
STREET ADDRESS	İ		6.3 STREET	TADDRESS	ł	
CITY-ST-ZIP			6.4 CITY-S	T- ZIP	·	
UIT-SI-ZIP	1		• <u> </u>	1		

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 employeed 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 appearment with an address with all other like empowered.

CR2E034 (11/98)