

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90025 033 ***150.00

DOCUM 1. Corporation PRIYAL II		06214	5								
Principal Place	of Rusiness	Mailing Ad	Idress			\dashv	1 EBB11000 (10 1916) 1816)	Tiin orin \$007	DHEW MORE CITES O	1884 BIII 1884	
8257 #6 NORM/	ANY BLVD.	8257 #6 NO	DRMANY BLVD. LLE FL 32221								
							DO NOT Will 3. Date incorporated or Qualife		SPACE		ı
							07/13/1998	•			
a Principal D	ace of Business	2a. Mailing	Address				4. FEI Number		Apr	plied For	1
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				59-352225	۷	No	Applicable]
21 DBA TONES ROOD GENERAL STUZE Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired				\$8.75 Additional Fee Required		
22 1018 TONFS ROAD 27 City & State							6. Election Campaign Financin	, _□	\$5.00	Мау Ве]
23 JACKSONVILLE. FC 28					Trust Fund Contribution					o Fees	4
Zip	Country	Zip	···	Count	y		This corporation owes the ca Personal Property Tax.	rrent year to		□No	
24 32~		29	gent 3				10. Name and Address of New	Registered			1
	9. Name and Address of Current	Registered A	3eur	8	Name		10, 110, 110, 110, 110, 110, 110, 110,				1
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8257	#6 NORMANY BLVD.			8:	Sheer	ADDITOS	8 (P.O. BOX NUMBER IS NOT ACCE				1
JACH	KSONVILLE FL 32221			8	9		· · · · · · · · · · · · · · · · · · ·				}
ł				8	City				85 Zip C	code	1
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11. Pursuant office of reagent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligati	and 607.1508 of Florida. Such ons of, Section	, Florida Statutes, i change was auth i 607.0505, Florid	, the abor horized b la Statute	ve-named y the corp s.	corpor oration	ation submits this statement for the board of directors, I hereby acc	ept the appo	i changing its Intrient 83 rec	registered pistered	
SIGNATURE		_					when reinstating)	DATE			
12.	Signature, typed or partied name of registered agent OFFICERS AND			13.			ADDITIONS/CHANGES TO C	FFICERS A	ND DIRECTO	RS IN 12] 👸
TITLE	OVAS JOHT DELETE 11		1.1 TITLE P		Pr	resident HUL S.PASEL		Change	Addition	CR2E034 (11/98)	
NAME .			1.2 NAME	1.2 NAME R		HUL S. PAULL	m			꾨	
STREET ADDRESS	0151-6 40x2001711	BLOD		1.3 STRE	ET ADDRESS	85	57-6 mormand	BLOD			ĺЖ
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CITY-ST-ZIP				4.4 CITY-	ST-ZIP					C Addison	{
TILE			DELETE	5.1 TITLE		1			Change	Addition	
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TITLE			- DETELE	6.2 NAME						_	1
NAME CONCET ADDRESS					ET ADDRESS	1					
STREET ADDRESS				BA COV		I					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 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: _

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