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 # **P98000064678**1. Corporation Name

THE MAIL HOUSE, INC.

Principal Place of Business 2528 14TH STREET. S.E. Mailing Address

2528 14TH STREET, S.E. WINTER HAVEN FL 33844

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

04-14-1999 90153 057 *****8.75 04-14-1999 90153 058 ***150.00



WINTER HAVEN FL 33844		WINTER HAVEN FL 33844			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed				
					07/20/1998				
Principal Place of Business 2a. Mailing Address					4. FEI Number	<u>_</u>		ied For	
21 201 4th St. SW 26 201 4th S				<u>, w</u> _	59-3526715			Applicable	,
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & State	e	City & State			6. Election Campaign Financing	6. Election Campaign Financing \$5.00 May Be			نت ح د ا
23 Wint	er Huven, 71	28 Winter Haven, 71			Trust Fund Contribution	Ac	ded to	Fees	
Zip	Country	Zip	Count	X / 1	8. This corporation owes the current year			-1	
<u> 24 338</u>		29 33880 30	1	OIK	Personal Property Tax.	Yes	<u> </u>]No	
	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New Registere	u Agent			
GER	HARDT, LANA		Ľ	Name					
	14TH STREET, S.E.		8	2 Street Addr	et Address (P.O. Box Number is Not Acceptable)				
	TER HAVEN FL 33844		18	3					
*****				1					
		•	8	4 City	F	L 85	Zip Co	de	
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508, Florida Statutes,	the abo	ve-named corp	poration submits this statement for the purpose	of changi	ng its re	gistered	ı
office or re agent. I a	egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florida. Such change was auth ions of, Section 607.0505, Florida	orized t a Statute	y the corporations.	on's board of directors. I hereby accept the app	Onthient	as regis	stered	
SIGNATURE					·				,
	Signature, typed or printed name of registered agent			jent signature require		AND DID	-0700	C IN 12	œ
12. ·	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS			Addition	CR2E034 (11/98
TITLE	PSD	☐ DELETE	1.1 TITLE				anye		, , ,
NAME	GEBHARDT, LANA		1.2 NAM						ු ශූ
STREET ADDRESS	2528 14TH STREET, S.E.			ET ADDRESS				ì	2E
CITY-ST-ZIP	WINTER HAVEN FL 33844	DELETE	1.4 CITY 2.1 TITLE			☐ Ch	ange	Addition	l E
TITLE	CERUARRY RETER C								
NAME			2.2 NAM						
STREET ADDRESS				ET ADDRESS	•				
CITY-ST-ZIP	WINTER HAVEN,FL.33044	☐ DELETE	3.1 TITLE	-ST-ZIP		□ Ch	ange	Addition	
TITLE	·	C) OCCETE	3.2 NAM					_	
NAME				ET ADDRESS	•				ı
STREET ADDRESS				-ST-ZIP					l
CITY-ST-ZIP		DELETE	4.1 TITLE			☐ Ch	ange	☐ Addition	l
NAME		,	4. 2 NAM						l
STREET ADDRESS				ET ADDRESS					l
CITY-ST-ZIP		•	4.4 CITY						
TITLE		DELETE	5.1 TITLI			· Dch	ange	Addition	1
NAME	· ·		5.2 NAM	E	•				ĺ
STREET ADDRESS			5.3 STR	ET ADDRESS					ĺ
CITY-ST-ZIP			5.4 CITY	-ST-ZIP	·				
TITLE		. DELETE	6.1 TITLE			Ch	ange	☐ Addition	
NAME .			6.2 NAM	E					ľ
STREET ADDRESS			6.3 STR	ET ADDRESS				,	1
CITY-ST-ZIP			6.4 CITY	-ST-ZIP					j

4. 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-324-7129