PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # PORODO70626

FILED Apr 19, 1999 8:00 am Secretary of State 04-19-1999 90113 013 ***150.00

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Principal Place	of Business	Mailing Address		1		
	T CIRCLE WEST #485	4509 3RD STREET CIRCLE V	EST #485			
BRADENTON FL		BRADENTON FL 34207		DO NOT WRITE	IN THIS SPACE	
				3. Date Incorporated or Qualifed		
				08/07/1998		
		2a. Mailing Address	<u> </u>	4, FEI Number		died For
2. Principal Pla	ice of Business	26 167 GUIG	ing South	ո ՝		Applicable
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Suite, Apt#	, drive	27			Fee Rou	
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	9. Name and Address of Current	Registered Agent	81 Name/1			
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BOW	LES, NANCY K	në.	B2 Street Add	PSS (P.O. Box Number is Not Acceptate	型1261c W	ast
4509	3RD STREET CIRCLE WEST #46)O	83 750.	1 300 51/350		,
BRAL	DENTON FL 34207		$ $ $^{\circ} $ $^{\circ}\mathcal{Q}$			
			84 City 0	Manney	FI 85 70	267
			10/V	poration submits this statement for the	surpose of changing its	registered
11. Pursuant i	to the provisions of Sections 607.0502	and 607.1508, Florida Statute If Florida, Such change was av	thorized by the corporati	poration submits this statement for the poor's board of directors. I hereby accept	the appointment as reg	gistered
agent. I ar	n familiar with, and accept the obligati	ons of, Section 607.0505, Flori	da Statutes.			,
SIGNATURE	•			eri when reinstatino)	DATE	
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature require		CERS AND DIRECTO	
12.	Signature, typed or printed name of registered agent OFFICERS ANI	and title if applicable. (NOTE:	Registered Agent signature require	eri when reinstatino)	DATE	
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I nereby certify that the information supplies that this made the and accurate and that my signature shall have the same legal effect as if made under eath; 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 eath; that I am an indicated 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.