PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Apr 20, 1999 8:00 am Secretary of State

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Principal Place	e of Business		Mailing	Address			r radikosi (18 38/8) (átil 62/11 89/1 99/11 99/11	1 64416 61861 10110 1	(0 tm 3100 140)	
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MULBERRY FL				RRY FL 33860			DO NOT WRITE IN THE	S SPACE		
				•			3. Date Incorporated or Qualifed	O O! AOL		
•							08/18/1998			
2. Principal P	lace of Business		2a. Ma	lling Address			4. FEI Number		lied For	
21			26				59-335/736		Applicable	ĺ
Suite, Apt.	#, etc.		Suit 27	te, Apt. #, etc		.	5. Certificate of Status Desired.	\$8.75 A		
City & Stat	te _.			y & State			6. Election Campaign Financing	\$5.00 1	-	í
23			28				Trust Fund Contribution	Added to	Fees	
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24	25]		29	4.44	[30]	<u> </u>	Personal Property Tax. 10. Name and Address of New Registered			l
	9. Name and Ad	idress of Cu	rent registered	a Agent		81 Name		,		i
MAD	GARELLA, FRANI	(J			-		ress (P.O. Box Number is Not Acceptable)			I
INDAG		NE .	•			82 Street Add	ress (P.O. Box Humber is Not Acceptator)			ı
	Duntry Club La									1
6 C(Duntry Club La Berry FL 33860		-		1	83				
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6 CC MUL	BERRY FL 33860	Sections 607	0502 and 607.19 de of Florida. S ligations of, Sec	508, Florida Statu such change was ction 607,0505, El	ites, the at authorized orida Stati	84 City	poration submits this statement for the purpose of on's board of directors. I hereby accept the appropriate the property of the purpose of the property of the property of the purpose of the property of the purpose of the purpo	L I	1	: 1
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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 each; that I am an officer or director of the corporation or the receiver or trustee employment 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.

6.4 CITY-ST-ZIP

941-425-471