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**

FILED May 10, 1999 8:00 am Secretary of State 05-10-1999 90236 044 ***158.75

	
DOCUMENT # 1. Corporation Name	P98000075956

R. Steele, Inc.

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Ĺ								
Principal Riace of Business	Ma	iling Address						
609 COURT STREET		COURT STREET						
CLEARWATER EL 33655	CLE	ARWATER FL 33655			BO NOT			
*\						WRITE IN THIS	SPACE	
		,			3. Date Incorporated or Qua		n	
2. Principal Place of Business	28.	Mailing Address			September 4. FEI Number	1, 1998		plied For
21 456-8 Lakevie		456-8 Lake	view Driv	,,	159-3532	663		t Applicable
Suite, Apt. #, etc.	" DIIVE ZU	Suite, Apt. #, etc.	ATEM DITA	<u> </u>	707 3000		\$8.75	
22	27			1	5. Certificate of Status Desir	red 🖸	Fee Re	
City & State		City & State			6. Election Campaign Finan		\$5.00	May Be
23 Palm Harbor, 1	F1. 28	Palm Harbo	r, Fl.	}	Trust Fund Contribution	a []	Added t	
Zip Cou	intry	Złp	Country		8. This corporation owes the	e current year in	langible	
24 34683 25 (JSA 29	34683	USA	- }	Personal Property Tax.		ŬYes	Mo
9. Name and Ad	dress of Current Regist	ered Agent			10. Name and Address of I	lew Registered	Agent	
VDID OTENIADEL		•	81 Name	D.	La 11 Sta	ele		
KRUG, STEWART L			/)/Z Addres	s (P.O. Box Number is Not A				
609 COUNT STREET		450	6-8 Lakevie		zive			
CLEARWATER FL 3369	55		83	2/	Hanley		22	11.02
			84 City :/	$\frac{\alpha}{\alpha}$	TIMPOR		100 700	Code
			City F	aln	u Harbor	Fl	85 Zip (ようか	683
11. Pursuant to the provisions of S	Sections 607.0502 and 60	7.1508, Florida Statutes	, the above-named	corpor	allon submits this statement fo	or the purpose of	changing its	registered
office or registered agent, or b agent. I am lamiliar with, and a	eccept the state of Florid eccept the obligations of,	a. Such change was aut Section 807.0505, Florid	nonzed by the corp ia Statutes _{??}	oration:	s board of directors, I hereby	accebt the abbot	niment as rep	gisterea
SIGNATURE KITA	nattoole.	Segratary	Kita	Di	Steele	4/29	199	
Signature, typed or printed r	arms of registered agent and title if	applicable. (NO)E: R	legistered Agent signature	required w	hen reinstating)	DATE		
12.	OFFICERS AND DIRECT		13.		ADDITIONS/CHANGES TO	OFFICERS AN		
Pichard	L. Steele	OELETE	1.1 TITLE				Change	Addition
156 .8 Te	akeview Driv		1.2 NAME					
Dalm Uar	· - · · ·	- ·	1.3 STREET ADDRESS					
	bor, Fl. 34		1.4 CITY-ST-ZIP	<u> </u>				
NAME Rita N.	-	☐ DELETE	2.1 TITLE				☐ Change	Addition Addition
450 0 7	steele keview Driv	••	2.2 NAME	}				
		-	2.3 STREET ADDRESS	İ				
	bor, Fl. 34		2.4 CITV+ST-ZiP	 				<u> </u>
HILE		C) DELETE	3.1 TITLE		•		Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS	ĺ				
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP	 			☐ Change	C) Addition
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STREET ADDRESS			4.2 NAME					
i i		•	4.3 STREET ADDRESS	{				1
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NAME CIPEET ADDRESS			5.3 STREET ADDRESS]				ŀ
STREET ADDRESS			5.4 City-ST-ZIP	1				
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	 	······································		Change	Addition
NAME		III PELETE	8.2 NAME				m ruanda	["] vanigati
STREET ADDRESS			6.3 STREET ADDRESS)				
CITY-ST-ZIP			8.4 CITY-ST-ZIP	Ì				
14. I hereby certify that the information	ation supplied with this fill	ng does not qualify for the		d in Sec	tion 119.07(3)(i), Florida Statu	utes. I further cer	tify that the ir	nformation

ntal annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an eceiver or trystee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in flacing the manufactures. With all other like empowered. officer or director of the corporation Block 12 or Block 13 if channel and