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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90099 049 \*\*\*150.00

DOCUMENT #	P98000079968
DOCOMENT #	<b>F30000073300</b>

1. Corporation Name

STREET ADDRESS

Principal Place	e of Business	Mailing Address								
2603 NW 13TH		2603 NW 13TH ST #379			ľ					
GAINESVILE FL 32609 GAINESVILE FL 32609							DO NOT V	VRITE IN THIS	CDACE	
						Date Incomo	orated or Quali		SPACE	
						09/10/199	98		<del></del>	
2. Principal P	lace of Business	2a. Mailing Address			4.	FEI Number	35329	549	ļ	lied For
21		26				21-	3750		<del></del>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certificate of	Status Desire	d 🗆	<b>\$8.75</b> A	
22 City & Stat		City & State				Floation Con	wasian Einanai		\$5.00	
City & Stat	e e	28			6.	Trust Fund C	npaign Financi Contribution	'' <sup>9</sup> 🗆	Added to	
Zip	Country	Zip	Coun	itry	8.			current year In	tangible_	
24	25	<u> </u>	30	•	"	Personal Pro		···,····		□No _
2-7	9. Name and Address of Cur				10.	Name and A	Address of Ne	w Registered	Agent	
	W. T.O. I. 10140FOLV. A			81 Name						
	ILTON, KIMBERLY A		1	82 Street	Address (F	O. Box Num	ber is Not Acc	eptable)		
i	NE 39TH ST		L							
GAIN	IESVILLE FL 32609		l'	83						
				84 City			•	FL	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the ab	ove-named	corporatio	n submits this	statement for	the purpose of	changing its	registered
dfice or r	registered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was at	uthorizea	by the corb	oration's be	oard of directo	ors. I hereby a	ccept the appo	intment as reg	pistered
SIGNATURE		/NOTE:	Ponistared A	oent signature r	required when	reinstation)		DATE		<del></del> [
12.	Signature, typed or printed name of registered OFFICERS	AND DIRECTORS	13.	gent agnorale i			CHANGES TO	OFFICERS A	ND DIRECTO	RS IN 12
TITLE	8	DELETE	1.1 TITL	.E	-				TT-SEC	☐ Addition
NAME	HAMILTON, KIMBERLY A				1 <b>b</b>				E Change	1
STREET ADDRESS	1		1.2 NAA	Æ	Ham	ulton.	, Kimb	cr17 A.	[P] Olibingo	
1	/ 126 NE 39   M   5		1.2 NAM	ME REET ADDRESS	Ha~	ulton,	, Kimb	erly A.	<b>⊕</b> onungo	
CITY-ST-ZIP	7126 NE 39TH ST GAINESVILE FL 32609		1.2 NAA 1.3 STF		Ham 712 Ga	ulton L NE Lucsul	, Kimb 3970 Ne, F	urly A. 57. _ 32.u	,09	
CITY-ST-ZIP TITLE	GAINESVILE FL 32609	☐ DELETE	1.2 NAA 1.3 STF	REET ADDRESS Y-ST-ZIP	Han 712 Ga	ulton, unesul	, Kimb 3977 Ne, FI	uly A. 57. _ 320	Change	☐ Addition
	1	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT	REET ADDRESS Y-ST-ZIP LE	Han 712 Ga	ulton, uncoul	, Kimb 3974 Ne, F	coly A. 57. _ 320	.09	☐ Addition
TITLE	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAM	REET ADDRESS Y-ST-ZIP LE		ulton UNE Incoul	, Kimb 3970 Ne, Fi	crly A. 557. _ 32.4	.09	☐ Addition
TITLE NAME	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR	REET ADDRESS Y-ST-ZIP LE		ulton UNE Incom	, Kimb 3977	erly A. 57. _ 32.6	Change	
TITLE  NAME  STREET ADDRESS	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR	REET ADDRESS Y-ST-ZIP LE AE REET ADORESS Y-ST-ZIP		ulton, unesul	, Kimb 3970 Ne, Fi	- 32.0	.09	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GAINESVILE FL 32609	_	1.2 NAM 1.3 STF 1.4 CIT 2.1 TITU 2.2 NAM 2.3 STF 2.4 CIT	REET ADDRESS Y-ST-ZIP LE AE REET ADORESS Y-ST-ZIP LE		ulton, unesul	, Kimb 3970 Ne, FI	- 324	Change	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	GAINESVILE FL 32609	_	1.2 NAA 1.3 STF 1.4 CIT 2.1 TITU 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITU 3.2 NAA	REET ADDRESS Y-ST-ZIP LE AE REET ADORESS Y-ST-ZIP LE		ulton, unesul	, Kimb 3970 Ne, FI	- 324	Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	GAINESVILE FL 32609	☐ DELETE	12 NAM 1.3 STF 1.4 CIT 2.1 TITL 22 NAM 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STF 3.4 CIT	REET ADDRESS Y-ST-ZIP  AE REET ADDRESS Y-ST-ZIP  E ME REET ADDRESS Y-ST-ZIP		ulton, unesul	, Kimb 39th	32.	☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	GAINESVILE FL 32609	_	12 NAM 1.3 STF 1.4 CIT 2.1 TITL 22 NAM 2.3 STF 2.4 CIT 31 TITL 32 NAM 33 STF 34. CIT 4.1 TITL	REET ADDRESS Y-ST-ZIP  REET ADORESS Y-ST-ZIP  REET ADORESS Y-ST-ZIP  REET ADORESS Y-ST-ZIP		ilton, unesul	, Kimb 39th	coly A	Change	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	GAINESVILE FL 32609	☐ DELETE	12 NAM 1.3 STF 1.4 CIT 2.1 TIT 22 NAM 2.3 STF 2.4 CIT 31 TIT 32 NAM 3.3 STF 3.4 CIT 4.1 TIT 4.2 NAM	REET ADDRESS Y-ST-ZIP LE REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE		ilton, unesul	, Kimb 39th	coly A	☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAM 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAM 4.3 STF	REET ADDRESS Y-ST-ZIP  LE AE REET ADORESS Y-ST-ZIP E AE REET ADORESS Y-ST-ZIP LE AE REET ADORESS AY-ST-ZIP LE AE REET ADORESS AY-ST-ZIP LE AE REET ADORESS		ilton, unesul	, Kimb 3970 Ne, F	671, A	☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAM 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAI 4.3 STF 4.4 CIT	REET ADDRESS Y-ST-ZIP  LE AE REET ADORESS Y-ST-ZIP  E AE REET ADORESS Y-ST-ZIP  LE AE REET ADORESS Y-ST-ZIP  LE AE REET ADORESS Y-ST-ZIP  REET ADORESS Y-ST-ZIP		ilton, unesul	, Kimb 3970	51, 51, 320	Change Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF 2.4 CIT 3.2 NAM 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAI 4.3 STF 4.4 CIT 5.1 TITI	REET ADDRESS Y-ST-ZIP  AE REET ADDRESS Y-ST-ZIP  E AE REET ADDRESS Y-ST-ZIP  E ME REET ADDRESS Y-ST-ZIP  E REET ADDRESS Y-ST-ZIP  E REET ADDRESS Y-ST-ZIP		ilton, unesul	, Kimb 3970 Ne, F	57, 57, 320	☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF 2.4 CIT 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAM	REET ADDRESS Y-ST-ZIP  LE AE REET ADORESS Y-ST-ZIP  E REET ADORESS Y-ST-ZIP  E ME REET ADORESS Y-ST-ZIP  LE ME REET ADORESS Y-ST-ZIP  LE ME REET ADORESS		into a incomi	, Kimb 3970 Ne, FI	57, 57, 320	Change Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT 2.1 TIT 2.2 NAM 2.3 STF 2.4 CIT 3.1 TIT 4.2 NAM 4.3 STF 4.4 CIT 5.1 TIT 5.2 NAM 5.3 STF	REET ADDRESS Y-ST-ZIP LE AE REET ADORESS		ilton, NE	, Kimb 3970 Ne, FI	57, 57, 320	Change Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	GAINESVILE FL 32609	☐ DELETE	1.2 NAM 1.3 STF 1.4 CIT 2.1 TIT 2.2 NAM 2.3 STF 2.4 CIT 3.1 TIT 4.2 NAM 4.3 STF 4.4 CIT 5.1 TIT 5.2 NAM 5.3 STF	REET ADDRESS Y-ST-ZIP  LE REET ADDRESS Y-ST-ZIP		into ?	, Kimb 3970 Ne, FI	32.0	Change Change	☐ Addition

CITY-ST-ZIP 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE 2 G OFFICER OR DIRECTOR