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 # **P98000080288**1. Corporation Name

ZURAWSKI ENTERPRISES, INC.

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90115 027 ***150.00



Principal Place of Business Mailing Address							\$ 10E310#4 11@ (B4B) 107(1 EB44) #4141 B#144 #4	W 1810 WOME (1890	. 1818) 1911 188)
4621 MARINER BLVD. SPRING HILL FL 34609		4621 Mariner BLVD. Spring Hill Fl 34609				1	DO NOT WRITE IN TH	IS SPACE	
							3. Date Incorporated or Qualifed 09/14/1998	•	
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number	├ ─ 	oplied For
21		26					EIN 59 353 8615		ot Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.	_				5. Certificate of Status Desired		Additional equired
City & State		City & State	-				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 24	Country Zip Cou			ntry		This corporation owes the current year Intangible Personal Property Tax. To			
	9. Name and Address of Currer	it Registered Agent					10. Name and Address of New Registers	d Agent	
				81 Name "			1		
ZUR/ 4621			82	2 Street Addr		s (P.O. Box Number is Not Acceptable)			
SPRI	NG HILL FL 34609								
				84	City			. 85 Zip	Code
)	•		<u></u>		
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	thonzed	i by t	he corpo	corpora pration's	ation submits this statement for the purpose s board of directors. I hereby accept the ap	or changing its pointment as re	egistered
SIGNATURE							nen reinstating) DATE		
	Signature, typed or printed name of registered age		Registered	Agent	signature re	equired wi	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE	D OFFICERS AN	ID DIRECTORS	1.1 TI	n F	1/1	VI	CE PRESIDENT	Change	Addition
	ZURAWSKI, STEPHEN A		1.2 N			.ਦ	DULARD W. ZURAWS	KI SR	
NAME	4621 MARINER BLVD.		1.3 STREET ADDRESS		, L.	LINDA AVONUE	•	ì	
STREET ADDRESS	SPRING HILL FL 34609			14 CITY-ST-ZIP		7	WORLDAD NY. 11	901	
CITY-ST-ZIP TITLE			2.1 TI				1001010000	Change	Addition
NAME			2.2 N		-				ŀ
STREET ADDRESS	4621 MARINER BLVD.				3 STREET ADDRESS				
CITY-ST-ZIP	SPRING HILL FL 34609				4 CITY-ST-ZIP				
TITLE	OF TAPE THE PERSON	☐ DELETE	31 TI					Change	Addition
NAME	_		3.2 N	3.2 NAME					·
STREET ADDRESS	i e		33 STREET AD		ADDRESS		•)
CITY-ST-ZIP			3.4. C	ITY-S	Γ- Ζ ΙΡ ,	ļ			
TITLE		☐ DELETE	4.1 TI	îιΕ				☐ Change	Addition \
NAME			4, 2 N	AME	(((
STREET ADDRESS	433		4.3 5	4.3 STREET ADDRESS					1
CffY-ST-ZIP			4.4 C	TY- <u>S</u> T	-ZIP				
TITLE		☐ DELETE	5.1 TITLE					☐ Change	☐ Addition
NAME			5.2 N	AME		ļ			
STREET ADDRESS					AODRESS	ĺ			İ
CITY-ST-ZIP				TY-ST	-ZIP				
TITLE		☐ DELETE	6.1 TI)			Change	☐ Addition
NAME			62 N						ļ
STREET ADDRESS			6.3 \$	REET	ADDRESS				ļ

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. From an address, with all other, like empowered.

SIGNATURE: