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 # P98000094469

1. Corporation Name

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90007 016 ***150.00

LEXEL P	HUDUUTS, INC.							
Principal Place	e of Business	Mailing Address				- + LOUREGORD DEUR TOURE TRUIK OUDEN ANDER OUR DE TOUR TRUIK OUR FRANCE OUR		5 5111 H H I I I I I I I
4522 BAY POIN		PO BOX 27759						
PANAMA CITY BEACH FL 32411 PANAMA CITY BEACH FL 324						DO MOT MORE IN THE	NA CE	
						DO NOT WRITE IN THIS S	PACE	
						3. Date Incorporated or Qualifed 11/03/1998		
Principal Place of Business Za. Mailing Address						4. FEI Number	A	oplied For
21		26				59-354 1347		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27						equired
City & State	e	City & State	<u> </u>			6. Election Campaign Financing		May Be
23	0	28				Trust Fund Contribution		to Fees
Zip	Country	Zip	,	ıntry		8. This corporation owes the current year Inta	ngible ∐Yes	□No
	9. Name and Address of Curren	29	30	Г		Personal Property Tax. 10. Name and Address of New Registered A		
	S. Maille and Address of Curren	ir izadiare.en Whaiir		81	Name	to the state of th	<u></u>	
PICK	(RELL, TANYA MECHELLE				·			
4522 BAY POINT ROAD				82 Street Address (P.O. Box Number is Not Acceptable)				
	AMA CITY BEACH FL 32411			83	 			
				84	City	FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607 050	02 and 607.1508. Florida S	tatutes, the a	bove	e-named o	pration submits this statement for the ournose of o	hanging its	s registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change w	as authorizet	d bv	the corpor	n's board of directors. I hereby accept the appoint	ment as re	egistered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505,	, Florida Stat	utes	i <u>.</u>			
SIGNATURE	Signature, typed or printed name of registered agei	and and title if applicable (NOTE: Registered	d Ager	nt signature re	when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12
TITLE	D	☐ DELETE	E 1.1 TI	TLE			☐ Change	Addition
NAME	PICKRELL, TANYA MECHELLE		1.2 N	AME		•		
STREET ADDRESS	4522 BAY POINT ROAD		1.3 \$	TREET	T ADDRESS			
CITY-ST-ZIP	PANAMA CITY BEACH FL 324	111	1.4 C	ITY-S	T-ZIP			
TITLE	D .	☐ OELETI	E 2.1 TI	ITLE			☐ Change	Addition
NAME	TUTAK, UNAL		2.2 N	AME				ł
STREET ADDRESS	4522 BAY POINT ROAD		2.3 5	TREET	T ADDRESS			
CITY-ST-ZIP	PANAMA CITY BEACH FL 324	11	2.40	HY-S	ST-ZIP			
TITLE		DELETI	E 3.1 T	ITLE			Change	☐ Addition
NAME			3.2 N	AME		·		
STREET ADDRESS			3.3 S	TREET	TADORESS			
CITY-ST-ZIP			34 0	HTY-S	ST-ZIP			
TITLE		DELETI	E 4,1 TI	ITLE			☐ Change	Addition
NAME			4.21	IAME	\			
STREET ADDRESS			4.3 \$	TREET	TADDRESS			
CITY-ST-ZIP			4.4 C	ITY-S	T-ZIP_			
TITLE		☐ DELETI	E 5.1 Ti	ITLE			☐ Change	Addition
NAME			5.2 N					
STREET ADDRESS			5.3 \$	TREET	TADDRESS			
CITY-ST-ZIP					T-ZIP			
TITLE		☐ DELETI	E 6.1 T	TLE			☐ Change	☐ Addition
NAME	•		6.2 N	AME				
STREET ADDRESS			6.3 S	TREET	TADORESS			
CITY-ST-ZIP			6.4 C	ITY-S	T-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.

SIGNATURE:

800-788-0703