

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 14, 1999 8:00 am
Secretary of State

05-14-1999 90003 029 ***450.00

DOCUMENT # P98000094876

1. Corporation Name

PROFESSIONAL ELECTRONIC TRADERS OF FLORIDA, INC.

Principal Place of Business

712 147TH ST EAST
BRADENTON FL 34202

Mailing Address

712 147TH ST EAST
BRADENTON FL 34202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1998

4. FEI Number

☒ Applied For
☐ Not Applicable

2. Principal Place of Business

21 4890 W. Kennedy Blvd
Suite, Apt. #, etc.

22 500

23 Tampa FL

24 33609 25

26 33609 27

9. Name and Address of Current Registered Agent

GLENN, JOHN
712 147TH ST EAST
BRADENTON FL 34202

2a. Mailing Address

26 Suite, Apt. #, etc.

27

28 City & State

29 Zip Country

30

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME John Glenn
1.3 STREET ADDRESS 4890 W. Kennedy Blvd, Suite 500
1.4 CITY-ST-ZIP Tampa, FL 33609

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME S, T
2.3 STREET ADDRESS Rose Glenn
2.4 CITY-ST-ZIP 4890 W. Kennedy Blvd, Suite 500
Tampa, FL 33609

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME VP
3.3 STREET ADDRESS James Holdman
3.4 CITY-ST-ZIP 2351 Energy Dr., #1008
Baton Rouge, LA 70808

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME VP
4.3 STREET ADDRESS Linda Holdman
4.4 CITY-ST-ZIP 2351 Energy Dr., #1008
Baton Rouge, LA 70808

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0465406