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 03, 1999 8:00 am Secretary of State

05-03-1999 90010 009 ***150.00

6610 38TH AVENUE CIRCLE, WEST

BRADENTON FL 34209

Principal Place of Business		Mailing Address	;			
6610 38TH AVENUE CIRCLE. WEST BRADENTON FL 34209		6610 38TH AVENUE CIRCLE. WEST BRADENTON FL 34209				
. 2. Principal Plac	e of Business	2a. Mailing Addi	ress			
21		26				
Suite, Apt. #, etc.		Suite, Apt. #	, etc.			
22		27				
City & State		City & State				
		28				
3∤ Zip	Country	Zip	Country			

DO NOT WRITE IN THIS SPACE

11/06/1998	•		
4. FEI Number			Applied For
65-0901323			Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required	

\$5.00 May Be Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax.

	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.

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gistered Agent signature r	required when reinstation)	DATE	<u> </u>
12.	OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D DELETE	1.1 πTLE	D/P/5	Change	☐ Addition
NAME	PRINE, ROBERT E JR	1.2 NAME	9.70	•	
STREET ADDRESS	6610 38TH AVENUE CIRCLE, WEST	1.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34209	1,4 CITY-ST-ZIP			
TITLE	, DELETE	2.1 TITLE		☐ Change	Addition
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZiP		2. 4 CITY-ST-ZIP			•
TITLE	☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME		3.2 NAME	· ·		
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	☐ DELETE	4.1 TITLE		Change	☐ Addition
NAME		4. 2 NAME		•	
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP	•	4.4 CITY-ST-ZIP			
TITLE	☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY OT 71D		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 or an attachment with an address, with all other like empowered.

SIGNATURE: