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 # P98000105258

1. Corporation Name

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90028 024 ***150.00

	EC, INC.				
Principal Plac	o of Pusinose	Mailing Address			00101 01110 11001 01101 1011 1001
•		*			
3704 S.W. 7TH A CAPE CORAL FL		3704 S.W. 7TH AVENUE CAPE CORAL FL 33914		DO NOT WRITE IN THI	IS SPACE
				3. Date Incorporated or Qualifed	
				12/17/1998	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 3673		26		650883600	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	. — 1	City & State		6. Election Campaign Financing	\$5.00 May Be
23 NAP		28	Country	Trust Fund Contribution	Added to Fees
341	Country	Zip	Country	8. This corporation owes the current year I	ntangypie XYes □No
24 241	9. Name and Address of Current	Pagistared Agent	1	Personal Property Tax. 10. Name and Address of New Registered	
	9. Name and Address of Current	Kegisteran Agent	81 Name	10, Raine and Address of New Progration	a Agoint
BEUF	regard, lillian C				
3704 S.W. 7TH AVENUE			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	ļ
	CORAL FL 33914		83		
İ					7.0.1
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named corp	oration 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	in termior that, and decept the congen				Ì
SIGNATURE	Signature, typed or printed name of registered agent	and trile if applicable. (NOTE: Re	gistered Agent signature required	d when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition ☐
NAME	BEUREGARD, RONALD E				Į.
CORECT ADODCCC		1	1.2 NAME		
SIREE: ADDRESS	3704 S.W. 7TH AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL 33914	[] or or	1.3 STREET ADORESS 1.4 CITY-ST-ZIP		Chance Addition
CITY-ST-ZIP	CAPE CORAL FL 33914	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	CAPE CORAL FL 33914 D COLLINS, PATRICK F	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	D COLLINS, PATRICK F 804 WINTER GREEN COURT	(T) DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		☐ Change ☐ Addition
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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.

E. BEAUREGARD 3-1899 SIGNATURÉ: