

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 19, 1999 8:00 am
Secretary of State

05-19-1999 90005 001 *1,050.00

DOCUMENT # P98000106775

1. Corporation Name

XMAS EVE SPECIAL CORPORATION

Principal Place of Business

4701 W. HILLSBOROUGH AVE.
TAMPA FL 33614

Mailing Address

4701 W. HILLSBOROUGH AVE.
TAMPA FL 33614



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/24/1998

4. FEI Number

59-3548089

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

TIMCHAK, LOUIS J JR.
4701 W. HILLSBOROUGH AVE.
TAMPA FL 33614

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

Corporation Service Company

1201 Nays Street

Tallahassee

FL

85 Zip Code

32301-2525

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

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

Laura R. Dunlap, as agent

4-29-99
DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME BUSH, JACK E
STREET ADDRESS 4701 W. HILLSBOROUGH AVE.
CITY-ST-ZIP TAMPA FL 33614

TITLE ☐ DELETE

NAME FLOUM, ROBERT
STREET ADDRESS 4701 W. HILLSBOROUGH AVE.
CITY-ST-ZIP TAMPA FL 33614

TITLE ☒ DELETE

NAME SPRINGER, RAYMOND P
STREET ADDRESS 4701 W. HILLSBOROUGH AVE.
CITY-ST-ZIP TAMPA FL 33614

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

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Pres, D

VP CFO D
Jerry Kollar
Same

Sec
Michael Hennig
Same

Asst Sec
Julie Hicks
Same

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:

Michael Hennig
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99
Date

Daytime Phone #

CR2E034 (11/98)