

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 # P99000078579

1 Corporation Name Keep It Simple Sweetheart USA Corp

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -5 AM 11:14

Principal Place of Business

2302 Mitchell Pl.
Jacksonville, FL
32207

Mailing Address

2302 Mitchell Pl.
Jacksonville, FL
32207

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business	2. Mailing Address	3. Date of Incorporation	4. FEI Number	5. Certificate of Status Desired	6. Election Campaign Financing	7. This corporation owes the current year intangible Personal Property Tax.
2302 Mitchell Pl. Jacksonville, FL 32207	2302 Mitchell Pl. Jacksonville, FL 32207	9-2-1999	59-3599213	☐ \$8.75 Additional Fee Required	☐ \$5.00 May Be Added to Fees	☐ Yes ☒ No

8. Name and Address of Current Registered Agent

Mark Chestnut
9035 Henry Smith Rd
Hilliard, FL
32046

10. Name and Address of New Registered Agent

81 Name Mark Chestnut
82 Street Address (P.O. Box Number is Not Acceptable) 9035 Henry Smith Rd
83 Hilliard, FL
84 City
85 Zip Code FL 32046

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 607.3502, Florida Statutes.

SIGNATURE: A. President of Keep It Simple Sweetheart USA Corp. 4-20-00

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY, ST, ZIP		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, ST, ZIP		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: Mark A. Chestnut / Mark A. Chestnut 4-20-00 (904) 399-3935

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Corporate Seal