## 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 # S26039

NEW HORIZONS U.S.A., INC.

Principal Place of Business

103 US 301 BLVD W BRADENTON FL 34205-7900 Mailing Address

103 US 301 BLVD W

BRADENTON FL 34205-7900

## **FILED** Jan 23, 1999 8:00am **Secretary of State**

01-23-1999 90070 013 \*\*\*150.00



J	2 3 1200 1 500	D.M.D.2.11.074   E. 0.1200   1000	•		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					01/18/1991
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21 26					NOT APPLICABLE Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
27					5. Certificate of Status Desired Fee Required
City & Stat	le	City & State			6. Election Campaign Financing S5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Count	γ	8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax. ☐ Yes ☐No
•	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent
		€	8	1 Name	
BILL NIKITOPOULOS				2	/D.O. Dan M
103	103 US 301 BLVD., W.			2 Street A	Address (P.O. Box Number is Not Acceptable)
BRADENTON FL 34205			8	3	
			8	4 City	E 85 Zip Code
44.15	A TABLE CO. ST. ACT OF	22 1 607 4506 51 11 61 11		<u> </u>	
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au	uthorized b	y the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
Ū	im ramiliar with, and accept the obliga	idona di, aection 607.0005, FIOF	iiua ətatütt	· •	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered Ag	ent signature re	equired when reinstating) OATE
12.	OFFICERS AN	ND DIRECTORS	13.		. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TMLE	Р	☐ DELETE	1.1 TITLE		Change Addition
NAME	NIKITOPOULOS, BILL		1.2 NAME	:	
STREET ADDRESS			13 STRE	ET ADORESS	
CITY-ST-ZIP	BRADENTON FL.		1.4 CITY		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	NIKITOPOULOS, GEORGE		2.2 NAME		
STREET ADDRESS	103 US 301 BLVD., N			ET ADDRESS	
CITY-ST-ZIP	BRADENTON FL		2. 4 CITY	1	
TITLE	Parte Magi	☐ DELETE	3.1 TITLE	ļ	Change Addition
NAME	· · · · · · · · · · · · · · · · · · ·		3.2 NAME	ĺ	
STREET ADDRESS	rando de la la compania de la compa La compania de la co		3.3 STRE	ET ADDRESS	17.3 C (3)
CITY-ST-ZIP			3.4. CITY	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change 👬 📴 Addition
NAME			4. 2 NAM	.	
STREET ADDRESS	· ·			ET ADDRESS	
CITY-ST-ZIP			4.4 CITY-		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		—	5.2 NAME		
STREET ADDRESS			5.3 STRE	ET ADDRESS	
	**		5.4 CITY-	1	
CITY-ST-ZIP	The Market Co.	☐ DELETE	6.1 TITLE	<b>∪</b> 1-ΔΓ	☐ Change ☐ Addition
TITLE	Secretary of the second	□ DECE IE			☐ Change ☐ Addroor
NAME	The State of the S		6.2 NAME		
STREET ADDRESS	• • • • • • • • • • • • • • • • • • •		6.3 STRE	ET ADDRESS	
CITY-ST-ZIP	•		6.4 CITY-	ST-ZIP	

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is que and accurate and that my signature shall have the same legal effect as if made under oath; that I am an rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address, with all other like empowered. 14. I hereby certify that the information supplied indicated on this annual report or supplied officer or director of the corporation of the corporation of the Block 12 or Block 13 if changed, or an annual report of the

**SIGNATURE**