## 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 # S61067 1. Corporation Name

ATK INVESTMENTS, INC.

Principal Place of Business Mailing Address									
Timopar rade of bounded		7861 CAUSEWAY BLVD. S.							
ST. PETERSBURG FL 33707		ST. PETERSBURG FL 33707				DO NOT WRITE IN THIS SPACE			
					3. Date Incorpora		3 SPACE	<del>_</del>	
					06/20/1991				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		<u> </u>	oplied For	
21		26	·		59-3074452			ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired  \$8.75 Additional					
27		27			Fee Required				
City & State City & State		City & State			6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution Added to Fees				
Zip Country		Zip	Zip Country		8. This corporation owes the current year Intangible				
25 29		29 3	30		Personal Prop		□Yes	ØNo	
	9. Name and Address of Curren	t Registered Agent			10. Name and A	ddress of New Registered	d Agent		
NAME OF THE PROPERTY OF THE PR			81	1 Name					
KOWALCHUK, RICHARD			82	Street Add	dress (P.O. Box Number is Not Acceptable)				
7861 CAUSEWAY BLVD. S.						<u>منعق يعه من د الانتيار ها . أنجان .</u>	4 1 1 1 1 1 1 2 1 A .	6 811 a12.11.51	
ST. PETERSBURG FL 33707									
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			84	City	·	F!		0000	
SIGNATURE	Signature, typed or printed name of registered age		egistered Age	nt signature require	ad when reinstating)	DATE HANGES TO OFFICERS A	AND DIRECT	ORS IN 12	
12.	OFFICERS AND DIRECTORS  DELETE		1.1 TITLE		5 99773		☐ Change	☐ Addition	
TITLE	KOWALCHUK, RICHARD		1.2 NAME						
NAME	7001 CALICEWAY DIVID C			T ADDRESS		, i		. }	
STREET ADDRESS	ST. PETERSBURG FL 33707		1.4 CITY-5						
CITY-ST-ZIP	SI. PETERODORA I E SSIVI	☐ DELETE	2.1 TITLE	01-ZIP	<del></del>		☐ Change	Addition	
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NAME	•		3.2 NAME						
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TITLE		☐ DELETE	5.1 TITLE 5.2 NAME			· ., · ·	criange		
NAME	1		1					•	
STREET ADDRESS	1								
STREET ADDITED	S		5.3 STREE	TADDRESS	• •				

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**FILED** 

Feb 08, 1999 8:00am

**Secretary of State** 

02-08-1999 90069 027 \*\*\*150.00

Addition