## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # \$89739 1. Corporation Name

ULTRA FRESH OF TAMPA RAY, INC.

ULINA	HEST OF TANK A DAT, INC	•					
Principal Place	of Business	Mailing Address			I (Bolld) [ (B) (B)(\$ (B)) (B BB 3)() a lett dear a	.,611 61611 61617	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2862 GULF TO BAY BLVD 2862 GULF TO BAY BLVD							
SUITE A SUITE A							
CLEARWATER FL 33759 CLEARWATER FL 33759					DO NOT WRITE IN THIS	SPACE	
US		, US			3. Date Incorporated or Qualifed 10/25/1991		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	oplied For
21		26		59-3099184		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75	
22	27			g, defined of dialog beared	Fee Re	equired	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 28					Trust Fund Contribution	Added	to Fees
			Country		8. This corporation owes the current year Inf		_/
24	25	29 3	30		Personal Property Tax.	Yes	☑No
L.,	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name	e in the second of the second	-	-
HUDSON, TONI				Stroot Add	ress (P.O. Box Number is Not Acceptable)		
2862-A GULF TO BAY BLVD				Street Addi	ress (F.O. Box Humber is Not Acceptable)		ļ
CLE/	ARWATER FL 33759		83				
			84	City	· FL	85 Zip (	Code
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligat	of Florida, Such change was autions of, Section 607.0505, Floric	thorized by da Statutes	the corporati	poration submits this statement for the purpose of on's board of directors. I hereby accept the appo	intment as re	gistered
0.0.0	Signature, typed or printed name of registered agent		-	t signature require	ed when reinstating) DATE		
12.	OFFICERS AND		13.	1	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D	☐ DELETE	1.1 TITLE	-		Change	Addition
NAME	HUDSON, SCOTT		1.2 NAME				
STREET ADDRESS	2862-A GULF TO BAY BLVD		1.3 STREET	ADDRESS			İ
CITY-ST-ZIP	CLEARWATER FL 33759 1.4CI		1.4 CITY-S1	-ZIP			
TITLE	D	☐ DELETE 2.1 T				Change	☐ Addition
NAME	HUDSON, TONI 22N		2.2 NAME	ļ			j
STREET ADDRESS	ARRA A CHIEF TO DAY DUID		2.3 STREET	ADDRESS			ĺ
CITY-ST-ZIP	OLEADALATED EL ACTEC		2. 4 CITY-S	T-ZIP	•		
TITLE			3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			- 3.3 STREET	ADDRESS			: -
1		، عب ربو ،	3.4. CITY-S				,
CITY-ST-ZIP	11.75.0	☐ DELETE	4.1 TITLE	, <u></u>	· · · · · · · · · · · · · · · · · · ·	Change	Addition
} _			4. 2 NAME				
NAME		· ·		ADODECC			
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST	I-ZIP		☐ Change	☐ Addition
TITLE	•	L-J DELETE	5.1 TITLE			☐ Orlange	
NAME	•		5.2 NAME	**************************************	•		1
STREET ADDRESS			5.3 STREET				ĺ
CITY-ST-ZIP			5.4 CITY-\$1	r-ZIP			
TITLE	<u>.</u>	☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME		•	6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			1

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 received 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.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP



Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90148 009 \*\*\*150.00