## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Aug 06, 1999 8:00 am Secretary of State 08-06-1999 90007 046 \*\*\*150.00

MCDUF	MENT # V3: n Name V3: FIE ENTERPRISES,							18)) <b>111</b> () <b>1</b>	1811 BIBN BIBN		( <b>) [ ]</b>
Principal Place	e of Rusiness		Mailing Address	<del></del> _	_ <del>_</del> _						
_523_E_BROWNLEE_ST 523_E_BROWNLEE_ST.						Ì					
STARKE FL 32			STARKE FL 32091	31.					-		
						\	DO NOT WRITE II	N THIS S	SPACE		
							3. Date Incorporated or Qualified				
 					····	{	05/18/1992				
	2. Principal Place of Business		2a. Mailing Address				4. FEI Number	Applied For			
Suite, Apt. #, etc.		26	26 Suite, Apt. #, etc.				59-31/2/0/	9-3172707   Not Applic   \$8.75 Addition			
			Suite, Apt.,#, et	<u></u>	أ المحمد		.5. Certificate of Status Desired	يا	•	Aguillona equired ≈	
City & State		-  21	City & State				6. Election Campaign Financing			May Be	
23	<del></del>	28	7			~	Trust Fund Contribution	<del></del> -		to Fees	
Zip	Country		Zip	C	ountry	<del></del> †	8. This corporation owes the current	vear			
24	25	29	-	30		l	Intangible Personal Property.	/··· [	Yes [	No	- [
	9. Name and Address				<u> </u>		10. Name and Address of New Regi	stered A	\gent		
					81 Name						
	CHELL, MAMIE L.				82 Street A	ddrae	s (P.O. Box Number is Not Acceptable)	·			
998 LAMAR					02 Sueer A	uuies	is (F.O. Dox Number is Not Acceptable)	,			
STA	NRKE FL 32091				83 -						
				•	24 2				ine Zin	Cado .	
					84 City			FL	85 Zip	Code	ļ
office or agent. I a SIGNATURE	registered agent, or both, in am familiar with, and accept	ot the obligations	of, section 607.05	05, Florida Si	tatutes. ·	ration	s board of directors. I hereby accept the	e appoin	itment as re	egisterea	
12	OFF				istered Agent signature 3.			DATE ERS ANI	DURECTO	DRS IN 1	2
12.		ICERS AND DIR	ECTORS	13	3.	14	ADDITIONS/CHANGES TO OFFICE		<del></del>		2
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TITLE  NAME  STREET ADDRESS	OP MITCHELL, MAMIE L 998 LEMAR ST.		ECTORS	13 TE 1.1 1.2	TITLE NAME STREET ADDRESS	55.5	P ADDITIONS/CHANGES TO OFFICE IChael McOUFFIL 1		<del></del>		dition
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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.

To whom it may concern, our return V37099 was Filed Late Due to mail Delivery. 602323-90007-46 at First I thought that some our may of mis placed it During construction, but now after looking closely, we realize that never got it. we have Had Problems with the mail system before, sweeth ment system