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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V52562 1. Corporation Name

CRT VENTURE OF FLORIDA, INC.

OIII VEI	TOTAL OF FLORIDAR, INC.					4				
Principal Place	e of Business	Mailing Address				1,400	., .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2561 COUNTRYSIDE BLVD.		2561 COUNTRYSIDE BLVD.			ļ					
# 6		# 6								
CLEARWATER FL 34621		CLEARWATER FL 34621				DO NOT WRITE IN THIS SPACE				
US		US				3. Date Inc 07/20/	orporated or Qualife 1992	d 		
2. Principal Pl	lace of Business	2a. Mailing Addres	ss			4. FEI Num	ber		Ap	plied For
21		26			59-313	2274		No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			- 0.4%-4			\$8.75 A	Additional	
22		27				5. Certificati	e of Status Desired		Fee Re	quired
City & State	e	City & State				6. Election	Campaign Financing	1 _	\$5.00	May Be
23		28				l l	nd Contribution	' 🗆	Added t	
Zip	Country	Zip	C	ountry		8 This con	poration owes the cu	rrent year in	tangible	
24	25	29	30			1	Property Tax.		Yes	□No
	9. Name and Address of Curre						nd Address of New	Registered	Agent	
	3. Hame the Madress of Carre			81	Name			-		
HAD	DAD, RANDOLPH C			Li						
	COUNTRYSIDE BLVD #6			82	Street	Address (P.O. Box N	lumber is Not Accep	table)		
	ARWATER FL 34621			-				 		
OLLA	ANTAILII I L STOZI			83			· ·			
				84	City				85 Zip (Code
						_		FL	- `	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida	a Statutes, the	a above		corporation submits	unis statement for un	ie purpose oi	changing its	gistered
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change	e was authon: 505, Florida S	zed by tatutes.	the corpo	oration's board of dir	ectors. I hereby acc	ept the appo	intment as re	gistered
office or r	edistered agent or both in the State	of Florida, Such change ations of, Section 607.05	e was authon: 505, Florida S	zed by tatutes.	the corpo	oration's board of oir	ectors. I nereby acc	DATE		
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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 attaching the property of the corporation of the corporatio SIGNATURE:

Daytime Phone #

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90076 038 ***150.00