**PROFIT** CORPORATION ANNUAL REPORT 1999

DOCUMENT # V53584



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90136 019 \*\*\*150.00

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FLORIDA BLUE SHEET, INC.		

Principal Place of Business Mailing Address 7238 HIAWASSEE OAK DRIVE 7238 HIAWASSEE OAK DRIVE ORLANDO FL 32818 ORLANDO FL 32818 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/28/1992 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-3157196 21 26 Suite, Apt. #, etc. - \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Country Country Zip 8. This corporation owes the current year Intangible Zic □No 30 Personal Property Tax. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MORNINGSTAR, GERSHOM CLARK Street Address (P.O. Box Number is Not Acceptable) 82 7238 HIAWASSEE OAK DRIVE ORLANDO FL 32818 83 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change ☐ Addition DVP □ DELETE TITLE 1.1 TITLE MORNINGSTAR, GERSHOM C NAME 1.2 NAME 7238 HIAWASSEE OAK DRIVE 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE MORNINGSTAR, CAROLANNE 22 NAME 7238 HIAWASSEE OAK DRIVE 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition \_\_ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CfTY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

CITY-ST-ZIP 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.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR Carolanna Mora

4/14/99

407/292-7458

CR2E034 (11/98)