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CORPORATION ANNUAL REPORT 1999	Katheri Secreta	RTMENT OF STATE I'VE Harris TY OF State CORPORATIONS		· • · · · · · · · · · · · · · · · · · ·
DOGUMENT #	1156956		99 JUN -7 AM	9: 33
1. Corporation Name				
ROBERTS ACQU	1151710W CORPORATION	N	TÄLLÄHÄV MELS	LORIDA
Principal Place of Business	Mailing Address		· 	
HWY 27 EAST	P.O. Box 17	1		
PERRY, FL	PERRY, FL	DO NOT WRITE IN	THIS SPACE	
, · · · · · · · · · · · · · · · · · · ·		323 10	3. Dute Incorporated or Qualifed	THIS STACE
			8/12/92	
2. Principal Place of Business	2a. Mailing Address	3 - \	4. FEI Number	Applied For
21 HWY 27 EAST	26 P.O. BOX 1	101	23-318000P	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired [_]	\$8.75 Additional Fee Required
City & State	City & State	_	6. Election Campaign Financing	
23 32347	28 32348		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Coun	itry Zip	Country	8. This corporation owes the current year	ar Intangible
24 25		30	Personal Property Tax.	XIYes []No
	ress of Current Registered Agent	81 Name	10. Name and Address of New Registe	ered Agent
JOSEPH R. R.		"3	65 R, ROBERTS	
505 PLANTAT	ion RD	82 Street	Address (P.O. Box Number is Not Acceptable)	
RERRY, FL		83	20 11 2 10 11/11/20 1/01 11	
		84 City		TAST 32. C. J.
		P	erry	FL 8 32347
 Pursuant to the provisions of Se office or registered agent, or bot 	ctions 607.0502 and 607.1508, Florida Statute	es, the above-named	corporation submits this statement for the purpos pration's board of directors. I hereby accept the a	e of changing its registered
agent. I are tamplar with, and ac	ccept the obligations of, Section 607.0505, Flor	rida Statutes.	oralion of an octors i meroby accept the a	ppointment as registered
SIGNATURE South to the state of printed par	me of registered agent and little if applicable (NOTE			
		Registered Agent signature to	expired when rejectation). [167]	
THLE PRESINEN	OFFICERS AND DIRECTORS	Registered Agent signature in	equired when reinstating! DAT ADDITIONS/CHANGES TO OFFICER	
	OFFICERS AND DIRECTORS			
NAME JOE R. R.	OFFICERS AND DIRECTORS [] DELETE	13.		S AND DIRECTORS IN 12
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4. 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:

SMATTRE MID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/99

850-584-4573 Davine Priore # intercepts att statement at 000 of heads a si headen?

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