PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # V57101

FERGUSON & KAPUSTA ENTERPRISES, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90089 035 ***150.00

Principal Place of Business			Mailing Address			I (BAII Bligg) mitt jaget unst anat und aust mitt antu aust. aust.	•••	
6221 14TH STREET WEST SUITE 302 BRADENTON FL 34207		6221 14TH STREET WEST SUITE 302 BRADENTON FL 34207				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 08/12/1992		
2. Principal Place of Business			2a. Mailing Address			4. FEI Number Applied For		
21		26	26			65-0350813 Not Applica		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required	'	
City & State						6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	1201	Zip Country			8. This corporation owes the current year Intangible	\neg	
24	25	29	30			Personal Property Tax. ☐ Yes ☐ No		
9. Name and Address of Current Registered Agent				<u> </u>	10. Name and Address of New Registered Agent			
FERGUSON, JOANNE E				81	Name Street A	ne eet Address (P.O. Box Number is Not Acceptable)		
2811 27TH AVENUE DRIVE WEST			<u> </u>			\dashv		
BRAI	DENTON FL 34205			83			ĺ	
•	•			84	City	FL 85 Zip Code	\neg	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florid	ia. Such change was auth	orized by	the corpor	orporation submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered	bŧ	
SIGNATURE	Signature, typed or printed name of registered age	nt and title	if applicable. (NOTE: Re	gistered Age	nt signature rec	quired when reinstating) DATE		
12. OFFICERS AND DIRECTORS				13.				
TITLE	Р		☐ DELETE	1.1 TITLE		☐ Change ☐ Ad	dition	
NAME	FERGUSON, JOANNE			1.2 NAME			1	
STREET ADDRESS 2811 27TH AVE. DR. N			1.3 STREE	TADDRESS		}		
CITY-ST-ZIP	BRADENTON FL			1.4 CITY- S	ST-ZIP			

☐ DELETE ☐ Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 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 6.4 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: