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**PROFIT CORPORATION** ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # **V60309** 



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Apr 21, 1999 8:00 am Secretary of State 04-21-1999 90166 022 \*\*\*150.00



	ERKS, INC.					. I (Må)( M)(A)	. <b>.</b>	<b>a</b> 10); <b>p</b> 1811 41:	DIJ BYDJI DIBNI	#1812 81 <b>6</b> 11 1881	
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Principal Place	e of Business	Mailing Address	_			C INNEL MICHIG	L <b>u</b> ller <b>ue</b> fe <b>r</b> leite <b>uu</b> te	<b>a ikil e</b> rati an	Eir Affit Aidit	Elet eten teet	
204 AZALEA SI	• •	204 AZALEA ST.	<del>-</del>								
LAKELAND FL 33803-4804		LAKELAND FL 33803-4804				DO NOT WRITE IN THIS SPACE					
US	US	·			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed						
						08/26/1992			<del>- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1</del>		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			<b>⊢</b> ——	pplied For	
Suito Apt # oto		26	Suite, Apt. #, etc.			<u>59-3141225</u>	<u>)                                    </u>			ot Applicable Additional	
Suite, Apt. #, etc.		27 Suite, Apr. #, etc.	The communication of the commu			5. Certifcate of St	atus Desired	<u> </u>	Fee R		-
City & State			City & State			6. Election Campa	aion Financino			May Be	
23		28				Trust Fund Cor				to Fees	
Zip	Country	Zip	Cour	itry		8. This corporation	·	nt year Inta	ngible		
24	25	29	30			Personal Prope			Yes	□No	
	9. Name and Address of Current	Registered Agent				10. Name and Ad	dress of New Re	egistered A	gent		
CAN	IFIELD, BRIAN			81 Name							
	AZALEA ST.		l	82 Street	Addres	ss (P.O. Box Numbe	r is Not Acceptab	ole)			
	ELAND FL 33803	•	ł	83		<del></del>	·				
							· .			<u> </u>	
			[	84 City				FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the ab	ove-named	corpor	ation submits this st	atement for the p	urpose of	changing its	s registered	
office or r	registered agent, or both, in the State of m familiar with, and accept the obligation	t Florida. Such change was au	inonzed	by the corp	oration	's board of directors	. I hereby accept	the appoin	itment as re	egistered	
SIGNATURE	Signature, hower or printed pame of registered agent.	and title if applicable. (NOTE:	Registered /	Agent signature	required v	when reinstating)		DATE		<u> </u>	2
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND		Registered /	Agent signature	required v	when reinstating) ADDITIONS/CH	ANGES TO OFF		D DIRECTO	ORS IN 12	(00)
			13.		required v	ADDITIONS/CH	ANGES TO OFF		D DIRECTO	ORS IN 12	(44,00)
12.	OFFICERS AND	DIRECTORS	13.	E		ADDITIONS/CH	ANGES TO OFF				24 (44,00)
12.	OFFICERS AND	DIRECTORS	13. 1.1 TITI 1.2 NAJ	E	PA	ADDITIONS/CH	ANGES TO OFF				(44,00)
12. TITLE NAME	OFFICERS AND CANFIELD, BRIAN	DIRECTORS	13. 1.1 TITI 1.2 NAJ 1.3 STF	.E VIE	PA	ADDITIONS/CH	ANGES TO OFF				(44,00)
12. TITLE NAME STREET ADDRESS	OFFICERS AND CANFIELD, BRIAN 204 AZALEA ST.	DIRECTORS	13. 1.1 TITI 1.2 NAJ 1.3 STF	LE WIE REET ADORESS Y-ST-ZIP	PA	ADDITIONS/CH	ANGES TO OFF				(44,66)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND CANFIELD, BRIAN 204 AZALEA ST.	DIRECTORS  DELETE	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT	LE WIE REET ADORESS Y-ST-ZIP LE	PA	ADDITIONS/CH	ANGES TO OFF		Change	□ Addition	CB2F624 (44/68)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND CANFIELD, BRIAN 204 AZALEA ST.	DIRECTORS  DELETE	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ	LE WIE REET ADORESS Y-ST-ZIP LE	PA	ADDITIONS/CH	ANGES TO OFF		Change	□ Addition	CD2E024 (44/08)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND CANFIELD, BRIAN 204 AZALEA ST.	DIRECTORS  DELETE	13. 1.1 TITI 1.2 NA 1.3 STF 1.4 CIT 2.1 TITI 2.2 NA 2.3 STF 2.4 CIT	LE ME REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP	PA	ADDITIONS/CH	ANGES TO OFF		7 Sw3	Addition  -4864  Addition	ODDE024 (44 (66)
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS AND CANFIELD, BRIAN 204 AZALEA ST.	DIRECTORS  DELETE	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI	LE ME REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP	PA	ADDITIONS/CH	ANGES TO OFF		Change	□ Addition	(44,00)
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	D CANFIELD, BRIAN 204 AZALEA ST. LAKELAND FL	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 3.4 CIT 4.2 NAV 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAV 5.3 STF	LE MIE REET ADORESS Y-ST-ZIP LE MIE REET ADORESS Y-ST-ZIP LE MIE REET ADDRESS Y-ST-ZIP LE MIE REET ADORESS Y-ST-ZIP LE MIE REET ADORESS Y-ST-ZIP LE MIE REET ADORESS	PA	ADDITIONS/CH	ANGES TO OFF		7 903 Change Change	Addition Addition	(00) 170
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D CANFIELD, BRIAN 204 AZALEA ST. LAKELAND FL	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 3.4 CIT 4.2 NAV 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAV 5.3 STF	LE ME REET ADORESS Y-ST-ZIP LE ME REET ADORESS	PA	ADDITIONS/CH	ANGES TO OFF		7 903 Change Change	Addition  Addition  Addition	(44,00)
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D CANFIELD, BRIAN 204 AZALEA ST. LAKELAND FL	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 4.4 CIT 5.1 TITI 5.2 NAV 5.3 STF 5.4 CIT 6.1 TITI 6.2 NAV	LE  ME REET ADDRESS Y-ST-ZIP LE  ME	PA	ADDITIONS/CH	ANGES TO OFF		7 SChange Change Change	Addition  Addition  Addition	(00) 17) 1001000

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.

GING OFFICE OF THE CANFIELD