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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # V70518**

n Name					
E VENTURES, INC.			1 (88) Fires (88) 88(E 118) (18) (18)		
		•			
e of Business	Mailing Address		1887   8741   1887   887   18		UN USUAN 1990
98	5126 W HWY 98		1		
P INN		2401	DO NOT WRITE IN TH	IS SPACE	
FL 3240!	03		3. Date Incorporated or Qualifed		
			10/13/1992		
lace of Business	2a. Mailing Address		4. FEI Number	App	lied For
	26		59-3146241		Applicable
#, etc.	<b>⊢</b> ¬		5. Certificate of Status Desired		
		<del></del>	O Floring Country Singular		
е	<b>⊢</b> ′		Trust Fund Contribution	Added to	
Country	Zip	Country	8. This corporation owes the current year		
25	29	30	Personal Property Tax.		□No
9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registere	d Agent	
ADWELL THOMAS HILTON, II		81 Name			
GULF DRIVE		82 Street	Address (P.O. Box Number is Not Acceptable)		ļ
) 		83			
AMA CITY BEACH FL 32408		84 City		85 Zip C	ode
			•	L	
enistered agent or both in the State	of Florida, Such change was	authorized by the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the app	of changing its r ointment as reg	egistered istered
m familiar with, and accept the obliga	ations of, Section 607.0505, Fi	orida Statutes.			
Signature, lyned or printed name of registered age	ent and title if applicable. (NOT	E: Registered Agent signature	required when reinstating) DATE		l
		13.	ADDITIONS/CHANGES TO OFFICERS		
D	Dry care		1,001,101,010,110,000	AND DIRECTOR	RS IN 12
THOMAS H. TREADWELL , II	☐ DELETE	1.1 TITLE		AND DIRECTOR  Change	RS IN 12
· · · · · · · · · · · · · · · · · · ·	LI DECETE	1.1 TITLE 1.2 NAME			
5126 W. HWY 98	□ DECETE				
		1.2 NAME		☐ Change	☐ Addition
5126 W. HWY 98	☐ DELETE	1.2 NAME 1.3 STREET ADDRESS			
5126 W. HWY 98		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		☐ Change	☐ Addition
5126 W. HWY 98		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY_ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		☐ Change	☐ Addition
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5126 W. HWY 98	DELETE	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Change ☐ Change	Addition Addition Addition
	e of Business  98 P INN FL 32401 lace of Business #, etc. e  Country 25 9. Name and Address of Currer  ADWELL, THOMAS HILTON, II COULF DRIVE  AMA CITY BEACH FL 32408 to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the obligs  Signature, typed or printed name of registered age  OFFICERS AN	e of Business  Mailing Address  P INN PANAMA CITY BCH. FL 3  Issuite, Apt. #, etc.  Country  25 P. Name and Address of Current Registered Agent  ADWELL, THOMAS HILTON, II  GULF DRIVE  AMA CITY BEACH FL 32408  to the provisions of Sections 607.0502 and 607.1508, Florida State egistered agent, or both, in the State of Florida. Such change was m familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was m familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida. Such change was m familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida. Such change was m familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida.	Mailing Address  98 5126 W HWY 98 PANAMA CITY BCH, FL 32401 US  lace of Business  2a. Mailing Address 2b. Suite, Apt. #, etc.  27 2 City & State 28 29 30 9. Name and Address of Current Registered Agent ADWELL, THOMAS HILTON, II 7 GULF DRIVE  AMA CITY BEACH FL 32408  AMA CITY BEACH FL 32408  Mailing Address  2a. Mailing Address 2b. Suite, Apt. #, etc.  27 29 30 9. Name and Address of Current Registered Agent 81 Name 82 Street 83 84 City  to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named egistered agent, or both, in the State of Florida. Such change was authorized by the corp m familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature)	a of Business  Malling Address  Size W HWY 98 PINN PANAMA CITY BCH. FL 32401 US  DO NOT WRITE IN TH  3. Date incorporated or Qualifed 10/13/1992  4. FEI Number  28  Suite, Apt. #, etc.  27  e  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Suite, Apt. #, etc.  Suite, Apt. #, etc.  10. Name and Address of New Registered  ADWELL, THOMAS HILTON, II  Y GULF DRIVE  AMA CITY BEACH FL 32408  Malling Address  4. FEI Number  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. Personal Property Tax.  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered  ADWELL, THOMAS HILTON, II  Y GULF DRIVE  AMA CITY BEACH FL 32408  81  Name  82  Street Address (P.O. Box Number is Not Acceptable)  Function of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose egistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the apprent familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	a of Business  Mailing Address  Start HWY 98  PINN PANAMA CITY BCH. FL 32401  US  3. Date Incorporated or Qualifed 10/13/1992  lace of Business  2a. Mailing Address 2b. Motor Status Pesired Status Desired Status Desired Status Desired Personal Property Tax.  Country Zip Country 2b. Name and Address of Current Registered Agent  COUNTRY Zip Country Street Agent 10. Name and Address of New Registered Agent  ADWELL, THOMAS HILTON, III  GULF DRIVE  AMA CITY BEACH FL 32408  ADWELL, In the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as 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, 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, 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, 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, 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.

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 employeers 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 adjusces with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP