Feb 15, 1999 8:00 am Secretary of State

02-15-1999 90030 034 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

	1999	Brylolen er er	ORPORATIONS	02-13-1999 90030 032	130.00
 Corporation 	MENT # L79341 E PROPERTIES, INC.			£ (48) (48) (48) (48) (48) (48) (48) (48)	Bibli bibli bibli gibli bibli (88)
Principal Place	of Business	Mailing Address		(1881/81) 811 18818 1818 81811 81831 1181	21914 31611 31611 31611 G1511 1001
PO BOX 5147 PO BOX 5147					
CLEARWATER FL 33758 CLEARWATER FL 33758			DO NOT WRITE IN THIS	S SPACE	
	,			3. Date Incorporated or Qualifed 06/11/1990	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3013652	Not Applicable \$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	5	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Ir	ntangible
24	25		30	Personal Property Tax.	Yes No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered	Agent
LECH	HNER, BERNARD J		<u> </u>		· · · · · · · · · · · · · · · · · · ·
	LAKEVIEW ROAD		82 Street Add 2 1 1 5	ress (P.O. Box Number is Not Acceptable) Range Road	Single of Adult Ave. (1889) - 85
CLEARWATER FL 33756		83	1,371,311,311,311	1. 第四周的第三	
İ			84 City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code
			Clea	arwater, Fl	L 33765
			1		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named corporati	poration submits this statement for the purpose cinn's board of directors. I hereby accept the app	of changing its registered ointment as registered
office or r	agistered agent of both in the State	ni Fiorida. Such Change was au	thorized by the corporati	ion's board of directors. I hereby accept the appr	of changing its registered ointment as registered
office or r	egistered agent, or both, in the State im familiar with and accept the oblig	ations of Section 607.0505, Flor	ithorized by the corporati ida Statutes. Bernard J.	ion's board of directors. I hereby accept the appearance of the chner	of changing its registered continent as registered
office or n agent. I a SIGNATURE	egistered agent, or both, in the State m familiar with and accept the oblig Standure, typed or printed name of registered ag	ations of, Section 607.0505, Florent and title if applicable. (NOTE:	thorized by the corporati	ion's board of directors. I hereby accept the appearance of the chner	4-99 AND DIRECTORS IN 12
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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 an attachment with an address, with all part like empowered. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS