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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P97000043728**1. Corporation Name

PA CORP.

Principal Place of Business		Mailing Address] ·	4 100 timut 119 (Otto tomit Anott a		01069 (1115 101	118	,,
16531 KERRY HILLS LN. SPRING HILL FL 34610		16531 KERRY HILLS LN. Spring Hill Fl 34610									
						\perp	DO NOT WR		SPACE		_
						3.	Date Incorporated or Qualifed 05/12/1997				
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address				FEI Number	<u></u>		Applied For	;
21		26	1 1				59-3450952	·		Not Applicab	:
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5.	Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State			6.	Election Campaign Financing		\$5.0	0 May Be	1	
23		28				Trust Fund Contribution	لبينا	Adde	d to Fees	_	
Zip Country		Zip Country				8.	This corporation owes the cur	rent year Int			
24	9. Name and Address of Current	. []	30			10	Personal Property Tax. Name and Address of New	Pagietared	Yes	□No	
	9. Name and Address of Current	Registered Agent		81	Name	10.	. Name and Address of New	register cu	Agent		\dashv
	RSON, DONALD A		-	82	0:						_
	31 KERRY HILLS LN.					1) 229	P.O. Box Number is Not Accept	able) sar za sa s	nda is entre let	ske somen der tal	,,
SPRING HILL FL 34610			Ī	83			14.60飞行的1.600				25
			-	84	City			<u>an an an an an a</u>	85 Zi	p Code	4:
and the second	·		}	-	Oily		1. 1. 第八分	FL	<u>.</u> 55 ~ 1	1 , ,	
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State or familiar with, and accept the obligation	of Florida: Such change was au	uthorized	by th	he corporation	n's bo	oard of directors. I hereby acce	pt the appoi	intment as	registered	
Signature, typed or printed name of registered agent					signature required		The state of the s	DATE			;
12.	OFFICERS AND		13.			;	ADDITIONS/CHANGES TO OF	FICERS AN			;
TITLE	P CARCON PONALD A	☐ DELETE	1.1 TITL 1.2 NAM				The state of the s		☐ Change	e	ion
NAME	CARSON, DONALD A	KERRY HILLS LANE								,	- { }
STREET ADDRESS	SPRINGHILL FL 34610			REET ADDRESS Y-ST-ZIP					•	• .	
CITY-ST-ZIP TITLE	V	☐ DELETÉ :			ZIP	,			Change	e	ion
NAME	CARSON, CONNIE S			Æ							
STREET ADDRESS	A DECK STEPPENS AND A DESCRIPTION OF THE PERSON OF THE PER		2.3 STR	REET ADDRESS							
CITY-ST-ZIP	SPRINGHILL FL 34610			2. 4 CITY-ST-ZIP					•		
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NAME			3.2 NAM	Æ							Ì
STREET ADDRESS	10 mg 1 mg				ADDRESS				· 动物学	發展關連	Şi 📗
CITY-ST-ZIP		☐ DELETE	3.4. CIT 4.1 TITL		- ZIP	-		<u>* 41 1253</u> 	Chang	e Addit	ion .
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NAME STREET ADDRESS		· ·			ADDRESS				-		
CITY-ST-ZIP	l l		ŀ	CITY-ST-ZIP							
TILE		☐ DELETE	5.1 TITL	_					Change	e 🔲 Additi	ion
NAME			5.2 NAM	ΚE			·				{
STREET ADDRESS	r e				ADDRESS		a,				-
CITY-ST-ZIP			5.4 CITY		ZIP		at the		- P2		_
TITLE	I have also a first to the	☐ DELETE	6.1 TITL	Ŀ	1				Change	e 🗍 Additi	ion i

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.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 17, 1999 8:00am

Secretary of State

02-17-1999 90093 009 ***150.00