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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 06, 1999 8:00am **Secretary of State**

02-06-1999 90016 019 ***150.00

DOCUMENT # S00515

A & B C	REWS & SONS, INC.	•			1			
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Principal Place	e of Business	Mailing Address			. 1 (80) (0) (1) (0) (1) (0) (1)	1 BI4B1 11881 B111 91911 B		6)6(1 618(1 168)
11105 DUVAL F	RD.	11105 DUVAL RD.					٠.	
JACKSONVILLE FL 32218		JACKSONVILLE FL 32218		DO NO	T WRITE IN THIS	CDACE		
					3. Date Incorporated or Q		SFACE	
					08/30/1990	gamed		
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	 ;	Ai	pplied For
21	add of Business	26			59-3029579		<u> </u>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				sired \square	\$8.75	Additional
22		27			5. Certifcate of Status De	sireu 🗀	Fee R	equired
City & Stat	e	City & State			6. Election Campaign Fin	ancing _		May Be
23		28			Trust Fund Contribution	1	Added	to Fees
Zip	Country	Zip	Country		8. This corporation owes			191 s
24	25	1,77	30		Personal Property Tax.		Yes	⊠No
	9. Name and Address of Curren	nt Registered Agent	81	Name	10. Name and Address o	i new Registered	Agent	
CRE	WS, ALLEN R.							
	05 DUVAL RD.	•	82	Street Add	dress (P.O. Box Number is Not	Acceptable)		•
	KSONVILLE FL 32218		83				· · · · · · · · · · · · · · · · · · ·	
		•						, ,
		4	84	City	•	FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statute	s. the above	named ser	rnoration submits this statement		changing its	s registered
				s-nameu cui				a mintarad
office or r	registered agent, or both, in the State	of Florida. Such change was au	thorized by	the corporat	tion's board of directors. I hereb	y accept the appoint	intment as re	egistereu
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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: