**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # OO

## **FILED** Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90044 034 \*\*\*150.00

1. Corporatio	IN TERRACE CORPORATION				
Principal Plac	e of Rusiness	Mailing Address			
· '		· ·			
2081 N E 56TH ST   2081 N E 56TH ST     FT LAUDERDALE FL 33308   FT LAUDERDALE FL 33308					
CAOCENDAL		TT ENODERIDALE TE UUCO			DO NOT WRITE IN THIS SPACE
]					3. Date Incorporated or Qualifed
					04/28/1964
Principal Place of Business     2a. Mailing Address					4. FEI Number Applied For
21 26					59-1083576 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired  \$8.75 Additional
22 27					5. Certificate of Status Desired Fee Required
City & State City & State				6. Election Campaign Financing \$5.00 May Be	
23	28				Trust Fund Contribution Added to Fees
Zip			Country ☐		8. This corporation owes the current year Intangible
24	9. Name and Address of Current	29 30	0		Personal Property Tax. Yes No  10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	81	Name	
ZAU	G, LEO J.		[]	INGING	
2081 N.E. 56TH ST.			82	Street	et Address (P.O. Box Number is Not Acceptable)
#101			83		
	AUDERDALE FL 33308		03	]	
			84	City	FL 85 Zip Code
44 Diversant	to the provisions of Continue 507 0503	and CO7 1509 Florida Statutas	<u> </u>		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
L	Signature, typed or printed name of registered agent a			t signature r	re required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		
NAME	ZAUG, LEO J.		12 NAME		WILLIAM RADFORD
STREET ADDRESS	2081 N.E. 56TH ST., #101		1.3 STREET		0120
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	☐ DELETE			
TITLE	VD	€ nere te			DIRECT OF
NAME	DISANZA, VINSENZO D.		2.2 NAME		Richard Tulley
STREET ADDRESS	2141 NE 56 ST FORT LAUDERDALE FL		2.3 STREET		\$ 3065 MESITAST- 17 322-8
CITY-ST-ZIP	רטאו באטטבאטאבב רנ D	DELETE	2.4 CITY-S	T-ZIP	Change Addition
TITLE NAME	LAYER, WILLIAM E.	T	3.1 TITLE 3.2 NAME		Change C Admin
_		•			
STREET ADDRESS	FORT LAUDEDDALE EL		33 STREET		»
CITY-ST-ZIP TITLE			3.4. CITY-S	1- <u>ZI</u> P	☐ Change ☐ Addition
NAME	BAKER, SYLVIA				
1		- 15 - 5 - 5 - 445		ADDDECC	
STREET ADDRESS	FORT I AUDEDDALE EL CACO		4.3 STREET		~ (
CITY-ST-ZIP TITLE			4.4 CITY-ST 5.1 TITLE	-412	Change Addition
NAME	QUAGLIERI, A.		5.0 NAME		· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	donoulli, A.		5.3 STREET	ADDRESS !	ıs)
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		5.4 CITY-ST	Ĭ	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	2081 NE 56 ST		6.3 STREET	ADDRESS	us
OTTLET MUUNESS	EODT LAUDEDDALE EL		64 CITY ST	710	

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.

SIGNATURE: