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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

# DOCUMENT # 309134

# FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90145 013 \*\*\*150.00

| Principal Place of Business  Mailing Address  1909 79TH ST CAUSWAY MIAMI BCH. FL 33141  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  09/14/1966  2. Principal Place of Business 2a. Mailing Address 25  Suite, Apt. #, etc. 26  Suite, Apt. #, etc. 27  City & State City & State City & State  Zip Country  Zip Country  Amiling Address  1909 79TH ST CAUSWAY MIAMI BCH. FL 33141  DO NOT WRITE IN THIS SPACE  Applied For  Not Applicable  Sp-1164747  Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Fee Required Trust Fund Contribution Added to Fees  Trust Fund Contribution Added to Fees This corporation owes the current year Intangible Parameter Reports Tow  | E. S. P. 1                                  | A, APIS., ING.                              |  |                |                 |                |            |                          |                   |                    |                   |                     |
|--|---|---|--|----------------|-----------------|----------------|------------|--------------------------|-------------------|--------------------|-------------------|---------------------|
| 1899 79TH ST CAUSMAY MAKE BCR FL 30141  1809 79TH ST CAUSMAY MAKE BCR FL 30141  1800 7 | Principal Place of Business Mailing Address |   |  |                |                 |                |            | ווג קוקונטטו ו           | IN DENI GUEL HEDD | י זושוש וקום ווזוו | AKARA MIDA MIDA T | נעטו ווטוט ונענו    |
| MAME BCH. F. 33141    Applied Fig. S.   Applied Fig. Suits   Applied Fig |   |   |  |                |                 |                |            |                          |                   |                    |                   |                     |
| T. Principal Place of Business   2a   Mailing Address   4. FER Number   Applied For   Not Applicable   Suite, Apt #, etc.   5. Suite, Apt #, etc.   5. Cerefitate of Status Desired   Res Reduction   Res Redu | 1000 10111 01 0110011111                    |   |  |                |                 |                |            |                          | DO NOT WE         | RITE IN THIS       | SPACE             |                     |
| T. Principal Place of Business   2a   Mailing Address   4. FER Number   Applied For   Not Applicable   Suite, Apt #, etc.   5. Suite, Apt #, etc.   5. Cerefitate of Status Desired   Res Reduction   Res Redu |   |   |  |                |                 |                | -          | 3. Date Incorpor         | ated or Qualife   | d                  |                   |                     |
| 2. Principal Place of Business   2. Mailling Address   5.   164747   |   |   |  |                |                 |                | 1          | •                        |                   |                    |                   |                     |
| Sulle, Apt. #, etc.    Sulle, Apt. #, etc.   | 2. Principal Pla                            | ace of Business                             | 2a. Mailing Address                    |                |                 |                | -+         |                          |                   |                    | Ap                | plied For           |
| Suito, Apt. #, etc.    20  |   |   |  |                |                 |                |            | 59-116474                |                   |                    | No                | t Applicable        |
| Zero      | <u></u>                                     |   |  |                |                 |                |            |                          |                   |                    |                   | I                   |
| Added to Fees    Zip   | <b>_ ├</b> ¬                                |   |  |                |                 |                |            | 5. Certificate of C      | Jiaius Desired    |                    |                   | <del></del>         |
| 28   29   20   29   20   29   30   8   Trust Form owes the current year interapplier personal Property Tax.   X ve   No.   N   |   |   |  |                |                 |                |            |                          |                   | ,                  |                   |                     |
| 3. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  GOLDMAN, CHARLES J 601 S FEDERAL HWY MAMI BEACH, FL HOLLYWOOD FL 33020  11. Pursuant to the proteitiers of Sections 607,0502 and 607,1508. Foritis Statutes, the above-named corporation submits this statement for the purpose of changing lis registered deficion or egistered agent. I am familiar with, and accept the obligations of, Section 607,0502 and 607,1508. Foritis Statutes, the above-named corporation submits this statement for the purpose of changing lis registered deficion or egistered agent. I am familiar with, and accept the obligations of, Section 607,0503, Florida Statutes.  SIGNATURE Spallow, Typed or presed name of registered agent of sections 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 607,0503, Florida Statutes.  SIGNATURE Spallow, Typed or presed name of registered agent of sections was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent of sections agent. I am familiar with, and accept the obligations of, Section 607,0503, Florida Statutes.  SIGNATURE  Spallow, Typed or presed name of registered agent  | 28  |   |  |                | <u> </u>        |                |            |                          |                   |                    |                   | to Fees             |
| 9. Name and Address of Current Registered Agent  GOLDMAN, CHARLES J 601 S FEDERAL HWY MIAM BEACH, FL HOLLYWOOD FL 33620  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 lis registered agent, or both, in the State of Florida, Such change suthorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent, or both, in the State of Florida, Such change suthorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent, or both, in the State of Florida, Such change suthorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent, or both, in the State of Florida, Such change suthorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent, or both, in the State of Florida, Such change suthorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent, or both, in the State of Florida, Such change suthorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent, or both, in the State of Florida, Such change suthorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent, or both, in the State of Florida, Such change is a street accept the appointment as registered agent, or both, in the State of Florida, Such change is a street accept the appointment as registered agent, or both, in the State of Florida, Such change is a street accept the provision's Dear of directors, 1 hereby accept the appointment as registered agent, and the accept the provision's Dear of directors, 1 hereby accept the appointment as registered agent, and the provision's Dear of directors, 1 hereby accept the appointment as registered agent, and the provision's Dear of directors, 1 hereby accept the appointment as registered agent, and the provision's Dear of Change is a | Zip   |   |  |                |                 |                |            | Mai.                     |                   |                    |                   |                     |
| GOLDMAN, CHARLES J 601 S FEDERAL HWY MAMI BEACH, FL HOLLYWOOD FL 33020  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes.  12. FL Signification 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, and familiar with, and accept the obligations of, Section 807 0505. Florida Statutes.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS IN 12  15. OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND D | 24  |   |  |                | <u> </u>        |                |            | 1 Crooker 1 reporty text |                   |                    |                   |                     |
| GOLDMAN, CHARLES J 601 S FEDERAL HWY MAMINI BEACH, FL HOLLYWOOD FL 33020  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 agent. or an armstall and accept the obligations of, Section 607 05005, Fordia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 05005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 05005, Florida Statutes.  SIGNATURE Suppliers, typida posted tomo of registered agent agent are title flepticiple.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PARTNER COLDMAN, GLADYS  STREET ADDRESS  OTY-51-72P  STREET ADDRESS  OTY-51-72P  STREET ADDRESS  OTY-51-72P  ORTH BAY VILLAGE FL 33141  DELETE  1 TITLE  DELETE  2 TITLE  DELETE  3 TITLE  D |   | 9. Name and Address of Currer               | nt Registered Agent                    |                | 81              | Name           |            | IV. Name and A           | aaress or New     | Kedizielen         | Agent             |                     |
| 601 S FEDERAL HWY MAMI BEACH, FL HOLLYWOOD FL 33020  11. Pursuant to the provisions of Sections 807 0502 and 607 1508, Florids Staintes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difficult or registered agent, or both in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difficult or registered agent, or both in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difficult or registered agent, or both in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difficult or registered | COL   | MAN CHARLES I                               |  |                | ["              | Harrie         |            |                          |                   |                    |                   |                     |
| MAMI BEACH, FL HOLLYWOOD FL 33020  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statistics, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 607.0505, Florida Statistics.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. OFFICERS AND DIRECTORS  14. OFFICERS AND DIRECTORS  15. OFFICERS AND DIRECTORS  16. OFFICERS AND DIRECTORS  17. OFFICERS AND DIRECTORS  18. OFFICERS AND DIRECTORS  19. OFFICERS AND DIRECTORS  19. OFFICERS AND DIRECTORS  10. NAME  10. OFFICERS AND DIRECTORS  10. OFFICERS AND DIRECTORS  11. TITLE  12. OFFICERS AND DIRECTORS  13. THE STEET ADDRESS  14. OFFICERS AND DIRECTORS IN 12. OFFICERS AND DI |   |   |  |                | 82 Street Addre |                |            | (P.O. Box Numb           | er is Not Accep   | otable)            |                   |                     |
| HOLLYWOOD FL 33020  44 City  FL  85 Zip Code  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 agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and corporation statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDIFIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  OFFICERS AND DIRECTORS  13. ADDIFIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  PARTINER  GOLDMAN, GLADYS  STREET ADDRESS  1909 79TH ST CSWY  13. STREET ADDRESS  1909 79TH ST CSWY  13. STREET ADDRESS  1900 79TH ST CRUSSWY  13. STREET ADDRESS  1900 79TH STREET CAUSEWAY  23. STREET ADDRESS  1900 79TH STREET CAUSEWAY  24. ADDRESS  1900 79TH STREET CAUSEWAY  25. STREET ADDRESS  1900 79TH STREET CAUSEWAY  26. STREET ADDRESS  1900 79TH STREET CAUSEWAY  27. STREET ADDRESS  1900 79TH STREET CAUSEWAY  28. STREET ADDRESS  1900 79TH STREET CAUSEWAY  1900 79TH STREET CAUSEWAY  1900 79TH STREET C |   |   |  |                | 92              |                |            |                          |                   |                    |                   |                     |
| 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 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  |   |   |  |                | 63              |                |            |                          |                   |                    |                   |                     |
| 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. Studies of the purpose of protect agent, or both, in the State of Florida. Studies of the purpose of protect agent, or both, in the State of Florida. Studies of the purpose of protect agent, or both, in the State of Florida. Studies of the purpose of protect name of negative devices of the purpose of protect name of negative devices.    12.   | HOLL  | 11100012 00020                              |  |                | 84              | City           |            |                          |                   | FI                 | 85 Zip (          | Code                |
| office or registered agent, or both, in the State of Floridas, Such change was authorized by the corporation's country of agent, I am familiar with, and accept the obligations of, Section 607/505/C, Floridas Statutes.    SIGNATURE   | 44 0  | the provisions of Sections 607.050          | 22 and 607 1508 Florida Sta            | tutes the a    | boye            | -named c       | cornora    | tion submits this        | statement for th  | e numose o         | f changing its    | registered          |
| SIGNATURE    Signature   Signa | office or re                                | agistered agent or both in the State        | of Fiorida, Such change was            | autnonze:      | J DV            | the corbo      | ration's   | board of director        | rs. I hereby acc  | ept the appo       | intment as re     | gistered            |
| Signature styred or printed amene of registered agent and tilled 4 speciation.   NOTE Registered Agent and reported them constraints.   ST   | agent. I an                                 | n familiar with, and accept the obliga      | ations of, Section 607.0505, F         | Florida Stat   | utes.           | •              |            |                          |                   |                    |                   | Į                   |
| 13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  | SIGNATURE                                   | Standard and a selection of conjectored ago | at and title if applicable (NC         | TF: Registered | l Agen          | t signature re | equired wh | en reinstating)          |                   | DATE               |                   | <del></del>         |
| TITLE : ST   |   |   |  |                | · · · · · · ·   |                | 1          |                          | HANGES TO C       | FFICERS A          | ND DIRECTO        | PRS IN 12           |
| NAME STREET ADDRESS 1909 79TH ST CSWY MIAMI BEACH, FL 00000  THE NAME GOLDMAN, GLADYS 13STREET ADDRESS 1900 79TH STREET CAUSEWAY NORTH BAY VILLAGE FL 33141  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADD |   |   |  | 1,1 T          | ΠE              |                | PAI        | RTNER                    |                   |                    | ☐ Change          | X Addition          |
| 13 STREET ADDRESS   1909 79TH ST CSWY   MIAMI BEACH, FL 00000   MIAMI BEACH, FL 000000   MIAMI BEACH, FL 00000   MIAMI BEACH   |   | <u> </u>                                    |  | 1.2 N          | <b>AME</b>      |                | RAI        | PHAEL STE                | INHARDT           |                    |                   |                     |
| MIAMI BEACH, FL 00000  | STREET ADDRESS                              |   |  | 1.3 S          | TREET           | ADDRESS        | 212        | 21 N.E. 19               | 90 TERRA          | CE                 |                   | }                   |
| TITLE  |   |   |  | 1.4 C          | TY-S1           | r-ZIP          | _NOI       | RTH MIAMI                | BEACH.            | FL 331             | 79                |                     |
| NAME STREET ADDRESS 1900 79TH STREET CAUSEWAY NORTH BAY VILLAGE FL 33141    DELETE   DELETE   3.1 TITLE   Change   Addition  |   |   | <b>▼</b> DELETE                        | 2.1 T          | TLE             |                | PAJ        | RTNER                    | •                 |                    | Change            | <b>X</b> Addition ( |
| 23 STREET ADDRESS   1900 79TH STREET CAUSEWAY   NORTH BAY VILLAGE FL 33141   DELETE   3.1 TITLE   3.2 NAME   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   Change   Addition   Additi   | NAME  |   |  | 22 N           | AME             |                |            |                          |                   |                    |                   |                     |
| CITY-ST-ZIP  | STREET ADDRESS                              |   | AY                                     | 2.3 S          | TREET           | ADDRESS        | P.(        | O. BOX 66°               | 9                 |                    |                   | 1                   |
| TITLE  | CITY-ST-ZIP                                 | * <del>*</del>                              |  | 2.40           | ITY-S           | T-ZIP          | FA1        | R HILLS,                 | NY 079            | 31                 |                   |                     |
| STREET ADDRESS   3.3 STREET ADDRESS  |   |   |  | 3.1 T          | TLE             | [,             | e .        | <del></del>              |                   |                    | ☐ Change          | Addition            |
| 34_CITY-ST-ZIP   | NAME  |   |  | 3.2 N          | AME             |                |            |                          |                   |                    |                   |                     |
| DELETE   | STREET ADDRESS                              |   |  | 3.3 S          | TREET           | ADDRESS        |            |                          |                   |                    |                   |                     |
| NAME   | CITY-ST-ZIP                                 |   |  | 34.0           | ITY-S           | T-ZIP          |            |                          |                   |                    |                   |                     |
| STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP  |   | <u> </u>                                    | ☐ DELETE                               | 4.1 T          | TLE             |                |            |                          |                   |                    | ∐ Change          | ☐ Addition          |
| A CITY-ST-ZIP  | NAME -                                      |   |  | 4. 21          | IAME            | ]              |            |                          |                   |                    |                   | ]                   |
| DELETE   DELETE   5.1 TITLE   Change   Addition  | STREET ADDRESS                              |   |  | 4.3 S          | TREET           | ADDRESS        |            |                          |                   |                    |                   | }                   |
| NAME  S1REET ADDRESS  CITY-ST-ZIP  DELETE  61 TITLE  NAME  STREET ADDRESS  6.3 STREET ADDRESS  6.3 STREET ADDRESS  CITY-ST-ZIP  61 TITLE  CHANGE  G2 NAME  STREET ADDRESS  G1TY-ST-ZIP  64 CITY-ST-ZIP   | CITY-ST-ZIP                                 |   |  |                |                 | T-ZIP          |            | _                        |                   |                    | Change            | Addition            |
| STREET ADDRESS   | TITLE                                       |   | ☐ DELETE                               |                |                 | J              |            |                          |                   |                    | Change            | Addition            |
| 5.4 CITY-ST-ZIP  | NAME  |   |  |                |                 |                |            |                          |                   |                    |                   |                     |
| DELETE   | STREET ADDRESS                              |   |  |                |                 | - 1            |            |                          |                   |                    |                   |                     |
| NAME   | CITY-ST-ZIP                                 |   | —————————————————————————————————————— |                |                 | 1-ZIP          | <u></u>    |                          |                   |                    | Chanca            | Addition            |
| STREET ADDRESS  CITY-ST-ZIP  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP   | TITLE                                       |   | ☐ DELETE                               |                |                 |                |            |                          |                   |                    | □ change          |                     |
| CITY-ST-ZIP 6.4 CITY-ST-ZIP  | NAME  |   |  | 1              |                 |                |            |                          |                   |                    |                   | İ                   |
|  | STREET ADDRESS                              |   |  |                |                 | - 1            |            |                          |                   |                    |                   |                     |
|  | CITY-ST-ZIP                                 | Ale . Al A Al Information                   | oth this filing does not avertic       |                |                 |                | l in Sec   | tion 119 07/31/0         | Florida Statuto   | s I further o      | ertify 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 trusted 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 form attackment an address, with all other like empowered.

SIGNATURE:

NG OFFICER OR DIRECTOR