## 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 # 344938**

1. Corporation Name

FUN TIME INTERNATIONAL, INC.

FILED										
Mar 31, 1999 8:00 am										
Secretary of State										
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03-31-1999 90065 037 \*\*\*158.75

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Principal Place	of Business	Mailing Address				81 (81) Biset Att	)II WIDH WIDH D	)18:1 <b>0:01) 108</b> :	
SCOS PURDY LANE - 5035 PURDY LANE									
WEST PALM BE	WEST PALM BEACH FL 99415			DO NOT WRIT	E IN THIS	SDACE			
1101 S. W. 15th St. 1101 S. W. 15th					3. Date Incorporated or Qualifed	E IN THIS	J-AOE		(
Deerfiel	d Beach, F1 33441-62		ach, 3441	FL -6241	04/21/1969				
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		<u> </u>	plied For	Į
21		26		<del></del>	59-2453165			t Applicable	١
:≝Suite, Apt∷# 22	Letc.	Suite, Apt. #, etc	نىن شىھىم		5. Certificate of Status Desired	X	Fee Re	Additional " equired	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		<b>\$5.00</b> Added t	•	
Zip	Country	Zip	Cour	try	8. This corporation owes the curre	nt year Inta	ngible		
24	25	29 30			Personal Property Tax.			□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered A	gent		1
				81 Name					ł
	TS, DONALD C		ŀ	82 Street Addr	ress (P.O. Box Number is Not Acceptate	ble)			l
		1 S. W. 15th St.	İ	Cacorradi	aso (i.e. bearing in terms of the company	,			
WES	<b>FPALM BEACH FL 33415</b> Dee	•		83		· <del>-</del>			l
	FL	33441-6241	}	84 City			85 Zip (	Code	1
				84 City		FL	163 2P	Joue	
office or re	gistered agent, or both, in the State of	f Florida. Such change was auth	orized	by the corporation	oration submits this statement for the pon's board of directors. I hereby accept	ourpose of o	hanging its tment as re	registered gistered	{
agent. I an	n familiar with, and accept the obligati	ons of, Section 607.0505, Florida	a Statu	tes.					İ
SIGNATURE		. Alexander G			d who a selectation!	DATE			_
	Signature, typed or printed name of registered agent OFFICERS AND		13.	gent signature require	ADDITIONS/CHANGES TO OFF		DIRECTO	DRS IN 12	ά
TITLE	PD	DELETE	1,1 TITI	<u>.</u>	ADDITIONO/OTBATOLO TO OTA	102110 1111	Change	Addition	1 5
NAME	PLETTS, DONALD C	FL 33441-62							4
		W. 15th St.	i	EET ADDRESS					ද
STREET ADDRESS	WEST PLAM BEACH FL 33415		l	Y-ST-ZIP					1 2
CITY-ST-ZIP	STD STD	Deelileid Deach	2.1 TiT				Change	Addition	"
1	GARWOOD, JANET		2.2 NA					_	
NAME OTRECT ADDOCOS	410 NORTH MILL STREET / P.O	ROX 3880		EET ADDRESS	_				
STREET ADDRESS	ASPEN CO 81612			Y-ST-ZIP					
CITY-ST-ZIP	ASD	DELETE	3.1 1111				Change	Addition	Ì
į.	LANDAU, CAROL	total water 198	3.2 NAM				_ •	_	
NAME STREET ADDRESS	704 NORTH ROAD	;		ZET ADDRESS				ľ	(
1	BOYNTON BEACH FL 33435			Y-ST-ZIP	·				
CITY-ST-ZIP TITLE	20111011 22 1011 1 2 00100	☐ DELETE	3.4. CII				Change	Addition	
NAME .		<u></u>	4. 2 NA				_ •		}
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NAME		<u></u>	6.2 NA	ne			=	-	(
STREET ADDRESS	, <i>'</i>			EET ADDRESS					
CITY-ST-ZIP				Y-ST-ZIP					

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:** 

GUIRED OFFICER OR DIRECTOR

71-8032