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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 396737

ECON SPOT 400 INC

1. Corporation Name

Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90010 003 ***150.00

FOOD 3	FOT #23, ING.												
Principal Plac	e of Business	Mailing Address					114	9:#8 titte 18110 81		114 1 00 4 0 101		4 E1811 G1811 1461	
7901 LUDLAM SO MIAMI FL		7901 LUDLAM RD SO MIAMI FL 33143						DO N	OT WO	CE IN TU	S SPACE		
						-	3 0-4-1-				S SPACE		٦ .
						'		corporated or (Qualifed				
2 D-1110	face of Business	2a. Mailing Address				03/02/1972 4. FEI Number Applied For						-	
	lace of business	 			-	59-13				⊢	lot Applicable	-	
21 Suite, Apt. #, etc.		Suite Ant. #. etc	Suite, Apt. #, etc.				39 130) 1111				Additional	┪
22		27				!	Certifcat	te of Status D	esired			Required	
City & State		City & State					6. Election	Campaign Fir	nancing		\$5.0) May Be	7
23		28						ind Contributio	_			to Fees	
Zip	Country Zip		Country			1	8. This cor	poration owes	the curre	ent year I	ntangible		7
24	25	29	30				Persona	I Property Tax	٤.		☐ Yes		4
	9. Name and Address of Curr	ent Registered Agent		 		11	0. Name a	nd Address	of New R	egistere	d Agent		_
14.01	UED DDUGE			81	Name								
	NER, BRUCE			82	Street Add	iress	(P.O. Bo)	Number is No	Accepta	ble)			7
7901 LUDLAM RD							<u> </u>			·····			4
MAI	VII FL 33143			83									1
				84	City						. 85 Zip	Code	_
					•					F			_
office or r	to the provisions of Sections 607.03 egistered agent, or both, in the Stat m familiar with, and accept the oblig	te cf Florida. Such change was	s authorized	d by th	ne corporati	ion's l	board of di	rectors. I here	by accep	t the app	ointment as	egistered	
SIGNATURE	Signature, typed or printed na ne of registered a	gent and title if applicable. (NO		d Agent	signature require	ed whe				DATE			_ 6
12.	OFFICERS A	AND DIRECTORS				.,	ADDITIO	NS/CHANGES	S TO OF	FICERS			- \$
TITLE	V	☐ DELETE	_								☐ Change	Addition	
NAME	DEUTSCH, ELLIOT J		1.2 N										8
STREET ADDRESS	7901 LUDLAM RD				DDRESS								Ļ
CITY-ST-ZIP	S MIAMI, FL 00000	DELETE		ITY-ST-	ZIP						Change	e Addition	1 8
TITLE	D		2.1 TI								Containing	, C Hadillot	
NAME	HARRIS, LARRY J			2.2 NAME									
STREET ADDRESS	7901 LUDLAM RD			2.3 STREET ADDRESS									
CITY-ST-ZIP	S MIAMI, FL 00000			2. 4 CITY-ST-ZIP 3.1 TITLE							☐ Change	- Addition	.†
TITLE	EXVP		3.2 N										1
NAME	WILNER, BRUCE S. 7901 LUDLAM RD.		1		ADDRESS								
STREET ADDRESS	S. MIAMI FL			ITY-ST									
TITLE	O. ORIZINI FL	DELETE	4.1 TI								☐ Change	- Addition	1
NAME				IAME									
STREET ADDRESS					ADDRESS								
CITY-ST-ZIP				ITY-ST-									
TITLE		☐ DELETE	5.1 TI								Change	Addition	1
NAME			5.2 N	AME									
STREET ADDRESS			5.3 5	TREET A	DDRESS								ļ
CITY-ST-ZIP			5.4 C	TY-ST-	ZIP								
TITLE		☐ DELETE	6.1 T	TLE			· · · · · · · · ·				Change	Addition	7
NAME		'\	6.2 N	AME									1
STREET ADDRESS		1	6.3 S	TREET	NDORESS								
CITY-ST-ZIP		//	6.4 C	ITY-ST-	ZIP								1

14. I hereby certify that the information supplied with this tiling 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 simulal 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 requiremental simulation of the corporation or the requiremental simulation of the corporation or the requiremental simulation of the corporation of the corporation or the requiremental simulation of the corporation of the corporation or the requiremental simulation of the corporation of the corporati

SIGNATURE:

BRUCE