PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Apr 21, 1999 8:00 am Secretary of State

	1999	DIVISION OF CO	PORATIONS	04-21-1999 90177 02	26 ***150.00)
1. Corporatio	MENT # F67227 SOCIATES, INC.	7				
Bringinal Blog	e of Business	Mailing Address				
		C/O ESTHER S. LEVOW				
C/O ESTHER S. LEVOW C/O ESTHER S. LEVOW 3650 NE 4TH AVENUE 3650 NE 4TH AVENUE						
BOCA RATON	FL 33431	BOCA RATON FL 33431		DO NOT WRITE IN TH	IIS SPACE	
				3. Date Incorporated or Qualifed 02/09/1982		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	App	olied For
21		26		59-2163691		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
City & Stat	e e	City & State	•	6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	
24	25	29 36	0	Personal Property Tax.		□No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registere	ed Agent	
LEVO	OW, ESTHER S.		81 Name			Į.
3650 NE 4TH AVENUE BOCA RATON FL 33431			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
1	•		<u> </u>			
	,		84 City	F	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes,	the above-named con	-		registered
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statutes, e of Florida. Such change was auth ations of, Section 607.0505, Florida	the above-named corporate statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app		registered pistered
11. Pursuant office or r agent. I a SIGNATURE	m familiar with, and accept the oblig	ations of, Section 607.0505, Florida	a Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app		registered pistered
agent. I a	m familiar with, and accept the oblig Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: Re	a Statutes, egistered Agent signature require	poration submits this statement for the purpose ion's board of directors. I hereby accept the appear of the properties of the proper	of changing its r pointment as reg	
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agent. I a SIGNATURE 12.	m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	pations of, Section 607.0505, Florida ent and title if applicable. (NOTE: Re ND DIRECTORS	a Statutes. egistered Agent signature require	poration submits this statement for the purpose ion's board of directors. I hereby accept the appear of the properties of the proper	of changing its roointment as reg	RS IN 12
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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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

04/19/1999 561-391-7347