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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H83346

BRUCE DAVID GREEN P.A.

FILED Feb 12, 1999 8:00am **Secretary of State**

02-12-1999 90004 035 ***150.00



Principal Place		Mailing Address % BRUCE D. GREEN	.,						
600 S. ANDREWS AVENUE SUITE 400		600 S. ANDREWS AVE. SUITE 400			DO NOT WRITE IN THIS SPACE				
FORT LAUDERDALE FL 33301		FORT LAUDERDALE FL 33301 US		3. Date Incorporated or Qualifed					
US		00			10/31/1985	-			
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	· · · · · ·	Api	plied For	
2, Filicipal I	race of Business	26			59-2602158		Not	t Applicable	2
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					8.75 A	Additional	1
22	.,	27			5. Certifcate of Status Desired		Fee Re	quired	
City & State	е	City & State			6. Election Campaign Financing	' <u> </u>	\$5.00	May Be	
23		28			Trust Fund Contribution		Added to	o Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation owes the cu				
24	25		30		Personal Property Tax.			□No	
	9. Name and Address of Curren	nt Registered Agent		24	10. Name and Address of New	Registered Age	ent		
005	EN BOUGE D			81 Name				ļ	
	EN, BRUCE D.			82 Street Add	tress (P.O. Box Number is Not Accep	table)			
	S. ANDREWS AVENUE			-	5 - 1 - 1 - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2	ing the second s	6170 2.2 2 6110 2.70 8		
	TE 400 T Lauderdale FL 33301			83	* 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (
run	I LAUDENDALE FL 33301			84 City	**************************************	Company of the second s	35 Zip C	Code	
	to the provisions of Sections 607.050			<u> </u>		FL	naina ita	rogistared	
office or r	edictored adent of both in the State	or Fiorina Such change was at	uu 10112et	T DA ILIG COLDOLAI	ion's board of directors. I hereby acc	ept the appointm	ent as reg	gistered	
agent: I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Floa	nda Stat	utes. Agent signature requir		DATE			á
agent: I a	m familiar with, and accept the obligations of the obligation of t	itions of, Section 607.0505, Floa	nda Stat	utes.		DATE		· ·	(80/
agent: I a	m familiar with, and accept the obligations of the obligation of t	nt and title if applicable. (NOTE:	: Registered	Agent signature requir	red when reinstating) ADDITIONS/CHANGES TO O	DATE FFICERS AND D		· ·	(41/08)
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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 expellemental 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 of the

SIGNATURE: