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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K40953

NICHOLAS H. HAGOORT, JR., P.A.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90024 021 ***150.00



Principal Place	e of Business	Maili	ing Address						ATE MINTER ANDRE	######################################
1901 SOUTH CONGRESS AVE.			1901 SOUTH CONGRESS AVE.							
WOOLBRIGHT CORPORATE CENTER, STE. 360			WOOLBRIGHT CORPORATE CENTER, STE. 360			. 360	DO NOT WRITE IN THIS SPACE			
BOYNTON BEACH FL 33426			NTON BEACH FL 3342	16			3. Date Incorporated or Qualific		SPACE	````
				•			10/25/1988			
2. Principal P	lace of Business	2a. 1	Mailing Address				4. FEI Number		A	pplied For
21	·	26					65-0079265			ot Applicable
Suite, Apt.	#, etc.	\$	Suite, Apt. #, etc.				5. Certifcate of Status Desired			Additional
22		27								equired
City & State	6	—	City & State	مهرست د شد	****		6. Election Campaign Financir	rg - 🗍 - er	-	May Be
23		28		0			Trust Fund Contribution			to Fees
Zip 24	Country 25	29	Zip	Count	try		This corporation owes the corporation of th	urrent year Inta	ingible Yes	I¥No
	9. Name and Address of Curren	t Registe	red Agent	1			10. Name and Address of New	w Registered A	Agent	
	The Market State		<u> </u>		31	Name			**	
	OORT, NICHOLAS H., JR.			<u> </u>	32	Street Addre	ess (P.O. Box Number is Not Acce	ptable)		
	S. CONGRESS AVE., SUITE 36	0		L			· control to the control	en engantante v	431 41 2 43	1.13+2 de , 2+8 44 de .
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<u> </u>	100 000 000			466.		named some			and igning it	s registered
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SIGNATURE	Signature, typed or printed name of registered/aller	nt and title if a	ppM e. (NOTE	: Registered A		named corpo he corporation	when reinstating)	DATE		
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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 accusate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the opporation 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.

561-369-1010