Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90171 039 ***150.00

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	#	K69933
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ALL STARS OF SOUTH FLORIDA, INC.				
Principal Place of Business Mailin	g Address		- + + + + + + + + + + + + + + + + + + +	imit Atliti Billi Aflit minit 1021
,	X 276036			
	RATON FL 33427-6036			
US US			DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualifed 03/02/1989	
2. Principal Place of Business 2a. Ma	iling Address		4. FEI Number	Applied For
21			65-0105408	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional	
27		5. Certificate of Cizida Bearing	Fee Required	
	ty & State		6. Election Campaign Financing	\$5.00 May Be
23			Trust Fund Contribution	Added to Fees
Zip Country Zip	Co	ountry	8. This corporation owes the current year Inta	
24 25 29	30		Personal Property Tax.	☐ Yes ☐ No
9. Name and Address of Current Register	ed Agent		10. Name and Address of New Registered	Agent
WED DAGUELLE		81 Name		
KLEIN, RACHELLE		82 Street Addre	ss (P.O. Box Number is Not Acceptable)	
3246 HARRINGTON DRIVE		OLI CEL ABORTO	50 (1 .5. Box (10.1155) 15 15 15 15 15 15 15 15 15 15 15 15 15	
BOCA RATON FL 33496		83		
				na Zi- Cado
		84 City	FŁ	85 Zip Code
 Pursuant to the provisions of Sections 607.0502 and 607. office or registered agent, or both, in the State of Florida. 3 agent. I am familiar with, and accept the obligations of, Se SIGNATURE 	ction 607.0505, Florida Sta	ed by the corporation atutes.	is poard of directors. Thereby accept the appoin	ntment as registered
Signature, typed or printed name of registered agent and title if app		ed Agent signature required		
12. OFFICERS AND DIRECT			ATTICIONAL PROPERTO DE CERTOS DO ANI	ID DIDECTORS IN 42
·			ADDITIONS/CHANGES TO OFFICERS AN	
тпт. РО	☐ DELETE 1.11	TITLE	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12 Change Addition
TITLE PD NAME KLEIN, RACHELLE	☐ DELETE 1.11		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE PD NAME KLEIN, RACHELLE STREET ADDRESS 3246 HARINGTON DRIVE	☐ DELETE 1.11	TITLE	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE PD NAME KLEIN, RACHELLE STREET ADDRESS 3246 HARINGTON DRIVE BOCA RATON FL	☐ DELETE 1.11 1.27 1.38 1.40	TITLE NAME	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change ☐ Addition
TITLE PD NAME KLEIN, RACHELLE STREET ADDRESS 246 HARINGTON DRIVE	☐ DELETE 1.11 1.27 1.38 1.40	TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE PD NAME KLEIN, RACHELLE STREET ADDRESS 3246 HARINGTON DRIVE BOCA RATON FL	☐ DELETE 1.11 1.28 1.38 1.40 ☐ DELETE 2.17	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change ☐ Addition
TITLE NAME KLEIN, RACHELLE STREET ADDRESS CITY-ST-ZIP BOCA RATON FL TITLE STD	☐ DELETE 1.11 1.27 1.33 1.40 ☐ DELETE 2.11 2.21	TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change ☐ Addition
TITLE NAME KLEIN, RACHELLE STREET ADDRESS CITY-ST. ZIP TITLE STD NAME KLEIN, MICHAEL I.	☐ DELETE 1.11 1.27 1.33 1.40 ☐ DELETE 2.11 2.21 2.33	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME KLEIN, RACHELLE 3246 HARINGTON DRIVE BOCA RATON FL TITLE NAME STREET ADDRESS KLEIN, MICHAEL I. 3246 HARRINGTON DRIVE	☐ DELETE 1.11 1.27 1.30 1.40 ☐ DELETE 2.11 2.21 2.33 2.4	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change ☐ Addition
TITLE NAME KLEIN, RACHELLE 3246 HARINGTON DRIVE BOCA RATON FL TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP STD KLEIN, MICHAEL I. 3246 HARRINGTON DRIVE BOCA RATON FL	☐ DELETE 1.11 1.27 1.38 1.40 ☐ DELETE 2.11 2.21 2.33 2.4 ☐ DELETE 3.11	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS LCTY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE PD NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE STD KLEIN, MICHAEL I. 3246 HARRINGTON DRIVE BOCA RATON FL	☐ DELETE 1.11 1.27 1.38 1.40 ☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STD NAME STREET ADDRESS CITY-ST-ZIP TITLE STD NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	☐ DELETE 1.11 1.27 1.38 1.40 ☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21 3.33	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE 1.11 1.27 1.38 1.40 ☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21 3.33 3.4.	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STD NAME STREET ADDRESS CITY-ST-ZIP TITLE STD NAME STREET ADDRESS CITY-ST-ZIP TITLE	☐ DELETE 1.11 1.27 1.38 1.40 ☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21 3.33 3.4. ☐ DELETE 4.11	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME STREET ADDRESS CITY- ST. ZIP TITLE NAME STREET ADDRESS CITY-ST. ZIP TITLE STD KLEIN, MICHAEL I. 3246 HARRINGTON DRIVE BOCA RATON FL TITLE NAME STREET ADDRESS CITY-ST. ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	☐ DELETE 1.11 1.27 1.38 1.4(☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21 3.38 ☐ DELETE 4.1 4.2	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	☐ DELETE 1.11 1.28 1.38 1.40 ☐ DELETE 2.11 2.21 2.33 2.4 ☐ DELETE 3.11 3.21 3.34 ☐ DELETE 4.1 4.2 4.33	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE 1.11 1.27 1.38 1.44 ☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21 3.34 ☐ DELETE 4.1 4.2 4.33 4.44	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	☐ DELETE 1.11 1.27 1.38 1.40 ☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21 3.33 3.4 ☐ DELETE 4.11 4.2 4.38 4.40 ☐ DELETE 5.11	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition Change Addition Change Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP	☐ DELETE 1.11 1.27 1.38 1.40 ☐ DELETE 2.11 2.21 2.38 2.4 ☐ DELETE 3.11 3.21 3.33 3.4. ☐ DELETE 4.1° 4.2 4.33 4.40 ☐ DELETE 5.1° 5.21	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Change Addition Change Addition Change Addition

CITY-ST-ZIP for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information courage and that my signature shall have the same legal effect as if made under oath; that I am an o exerute this report as required by Chapter 607. Florida Statutes; and that my name appears in all other like empowered. 14. I hereby certify that the information indicated on this annual report or sofficer or director of the corporation Block 12 or Block 13 if changed, o oplied with this filing does demental annual report is

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

ICER OR DIRECTOR

☐ DELETE

Addition

☐ Change