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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M00536

1. Corporation Name

FILED Mar 17, 1999 8:00 am Secretary of State 03-17-1999 90123 036 ***150.00

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Principal Place	of Business	Mailing Address	_					• • •	•	
601 E. SAMPLE ROAD. #101 601 E. SAMPLE ROAD. #101										
POMPANO BEACH FL 33064 POMPANO BEACH FL 33064						DO NOT WRI	TC IN TUIC	CDACE		
						3. Date Incorporated or Qualifed	IE IN ITIO	STACE		
						05/14/1984				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21		26				59-2411629			Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired			5 Additional	
22	<u></u>	27				3. 301110210 01 012100 0			Required	
City & State	2	City & State				6. Election Campaign Financing			00 May Be	
23		28				Trust Fund Contribution			led to Fees	
Zip	Country	Zìp		intry		8. This corporation owes the cur	rent year Inta	angible Yes	□No	
24	25	29	30			Personal Property Tax. 10. Name and Address of New	Registered			
	9. Name and Address of Current	t Registered Agent		81	Name	IV. Haille and Addiess of New I	1.0910100	-Hour		
CHIL	DIAC, ADIB ANTOINE									
	E. SAMPLE ROAD, #101	8			Street Addre	Iress (P.O. Box Number is Not Acceptable)				
	IPANO BEACH FL FL 33064			83						
				"						
				84	City		FL	85	Zip Code	
14 Pursuant	to the provisions of Sections 607.0502	2 and 607.1508. Florida Statut	es. the a	bove-	named corpo	pration submits this statement for the	numose of	changing	g its registered	
office or o	edistered agent, or both, in the State of	of Florida. Such change was a	utnorized	ז עס נ	he corporatio	n's board of directors. I hereby acce	pt the appoir	ntment a	s registered	
agent. i a	m familiar with, and accept the obligat	ions of, Section 607.0303, Fig	ijua otat	ulos.					1	
CICKLATION										
SIGNATURE	Signature, typed or ponted name of registered agen	t and title if applicable. (NOTE	Registered	Agent s	signature required	when reinstating)	DATE			
12.	Signature, typed or printed name of registered agen OFFICERS AN		Registered	Agent s		ADDITIONS/CHANGES TO OF		D DIREC		
						ADDITIONS/CHANGES TO OF		D DIREC		
12.	OFFICERS AN	D DIRECTORS	13.	TLE						
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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 supplied that 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 reference to the corporation or the reference to the corporation of the reference to the reference to the reference to the corporation of the reference to the

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SIGNATURE: