PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000004865

FILED Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90232 023 ***150.00

| r. Colporation | | | | | | | | | |
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| Principal Place | e of Business | Mailing Address | | | | | | | |
| 6300 HIGH RIDGE ROAD | | 6300 HIGH RIDGE ROAD | | | | | | | |
| LANTANA FL | | LANTANA FL | | | | DO NOT WRITE IN | THIS SPACE | | |
| | | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | | 11/06/1992 | | l | |
| 2 Oringinal Pi | lace of Business | 2a. Malling Address | | | | 4, FEI Number | Apr | lied For | |
| · | lace (i Dusiliess | 26 | | | | 65-0371260 | Not | Applicable | |
| Suite, Apt. | # etc | Suite, Apt. #, etc. | | | | Τ΄ _ | \$8.75 A | dditional | |
| 22 | , o.c. | 27 | | | | 5. Certificate of Status Desired | Fee Re | dniteq | |
| City & State | e | City & State | | | | 6, Election Campaign Financing | \$5.00 | May 8e | |
| 23 | | 28 | | | | Trust Fund Contribution | Added to | Fees | |
| Zip | Country | Zip | Cou | ntry | | 8. This corporation owes the current ye | | _ | |
| 24 | 25 | 29 3 | 0 | | | Personal Property Tax. | D ∕?es | □No | |
| | 9. Name and Address of Curre | nt Registered Agent | | | | 10. Name and Address of New Regis | tered Agent | | |
| | | | | 81 Na | eritë | | | | |
| TS10 | otis, paul | | | 82 St | reet Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| 6300 HIGH RIDGE ROAD | | | ' | | iner recire | | | | |
| LAN | Tana Fl. | | į | 83 | | | | . 1 | |
| | | | | 1 | | | 85 Zip C | ode | |
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| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508, Florida Statutes | , the al | bove-na | med corpo | oration submits this statement for the purpo | ose of changing its | indiana i | |
| 11. Pursuant office or re | to the provisions of Sections 607.05 egistered agent or both, in the fraction | 02 and 607.1508, Florida Statutes For Florida. Such change was aut | , the al | bove-nai | med corpo corporation | oration submits this statement for the purpon's board of directors. I hereby accept the | ose of changing its appointment as rec | istered | |
| | to the proceeding of Sections 60,05 egister so agent or both, in the fratte in falliller with and accept the oblig | 02 and 607.1508, Florida Statutes Fof Florida. Such change was aut ations of, Section 607.0505, Florid | , the al horized la Stati | bove-nai by the utes. | med corpo corporation | pration submits this statement for the purpoin's board of directors. I hereby accept the | ose of changing its appointment as reg | istered | |
| SIGNATURE | and may | | | | | when reinstating) | × / | ì | (|
| SIGNATURE | Signatura, typos of principles of the signature of the si | em and little if applicable (NOTE: R | | | | 21311 | RS AND DIRECTO | ì | 1/98) |
| SIGNATURE | Signatura, typos of principles of the signature of the si | em and little if applicable (NOTE: F | legistered | Agent sign | | when reinstating) | × / | ì | 1 (11/98) |
| SIGNATURE | Signatura types of professional appending OFFICERRA | em and little if applicable (NOTE: R | 13. | Agent sign | | when reinstating) | RS AND DIRECTO | ì | 34 (11/98) |
| SIGNATURE 12. | Signatura types de professional appendas OFFICERRA | em and little if applicable (NOTE: R | 13. 1.1 TI 1.2 NJ | Agent sign | eture required | when reinstating) | RS AND DIRECTO | ì | 2E034 (11/98) |
| SIGNATURE 12. TITLE NAME | Signatura types of professional appending OFFICERRA | em and little if applicable (NOTE: R | 13. 1.1 TI 1.2 N/ 1.3 ST | Agent sign TLE VME | eture required | when reinstating) | RS AND DIRECTO | RS IN 12 | CRZE034 (11/98) |
| SIGNATURE 12. TITLE NAME STREET ADDRESS | OFFICERRA D TSIOTIS, PAUL 6300 HIGH RIDGE ROAD | em and little if applicable (NOTE: R | 13. 1.1 TI 1.2 N/ 1.3 ST | TLE NAME TREET ADOI TY-ST-ZIP | eture required | when reinstating) | RS AND DIRECTO | ì | CR2E034 (11/98) |
| SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-SI-ZIP | OFFICERRA D TSIOTIS, PAUL 6300 HIGH RIDGE ROAD | em and 190e if applicable (NOTE: R NO DIRECTORS | 13. 1.1 TII 12 NJ 1.3 ST 1.4 CT | TLE AME TREET ADDI TY-ST-ZIP | eture required | when reinstating) | RS AND DIRECTO | RS IN 12 | CR2E034 (11/98) |
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or use exemption stated in Section 119.07(3)(i), Fronce Statutes. I further certify that the informatic ourrate and that my signature shall have the same legal effect as if made under oath; that I arn an grecute this report as required by Chapter 607, Florida Statutes; and that my name appears in I hereby certify that the inform indicated on this annual repo-officer or director of the corps Block 12 or Block 13 it change

SIGNATURE: