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CORPORATION ANNUAL REPORT

1999



FLORIDA DEPÁRTMENT OF STATE-

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000030553

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

01-27-1999 90034 041 ***150.00

BROUG	& MAII, INU.	•				188 1111 1881
Principal Place	e of Business	Mailing Address		1901(80) (10 1810) (111) (811) (811) (811)	19 IIII) BBIB) BIIDI DI	(40 11)) (88)
3186 SW MART	IN DOWNS BLVD	3186 SW MARTIN DOWNS	BLVD			
PALM CITY FL	34990	PALM CITY FL 34990		DO NOT WRITE IN TH	IS SPACE	.•
US		US		3. Date Incorporated or Qualifed	O OI NOC	
				04/26/1993		
2 Principal P	lace of Business	2a. Mailing Address	 ,	4. FEI Number	Appl	led For
21	1200 of 20011000 11011	26		65-0431564		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		· ·	\$8.75 Ad	ditional
22 =	- Lander of the same and	27			Fee Req	uired
City & Stat	e	City & State	1	6. Election Campaign Financing	\$5.00 N	lay Be
23		28		Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	·Country	8. This corporation owes the current year I		_
24	25	<u> </u>	30	Personal Property Tax.		□No
	9. Name and Address of Current		81 Name	10. Name and Address of New Registere	a Agent	
LIAT	THEWS, CRAIG C	y and the first of	1 1	<u> </u>		
	S SW MARTIN DOWNS BLVD		82 Street Add	dress (P.O. Box Number is Not Acceptable)		
	M CITY FL 34990	•	83	The Control of the Co	69 - 41, 804(6) 31(6) 21 53 (6) 52(6) 8(6) 21	dan managa dan melapai
7702			"	经常提供证据的		
م ف سومیوست			84 City	, 112 (1134) , 14 (113 ₄ (1134) , 1134 (1134)	85 Zip Co	de "
44 5	AN 45 Wildelpho of Sections 607 0603	and 607 1508 Elorida Statute	s the above-named con			egistered
office or r	registered agent, or both, in the State of	of Florida. Such change was at	thorized by the corporati	poration submits this statement for the purpose tion's board of directors. I hereby accept the app	ointment as regi	stered
65⊷agent. La	m familiar with, and accept the obligation	ions of, Section 607.0505, Flor	ida Statutes.	·		
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered Agent signature require	red when reinstating)		
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 12
TITLE	DP	☐ DELETE	1.1 TITLE	·序稿製作。	Change	☐ Addition
NAME	MATTHEWS, CRAIG C		1.2 NAME			
STREET ADDRESS	2815 FAIRWAY DR.		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. PIERCE FL 34982		1.4 CITY-ST-ZIP			
TITLE	DST	□ DELETE .	2.1 TITLE			
NAME	BROEG, A. L. JR.				☐ Change	Addition
STREET ADDRESS	3186 SW MARTIN DOWNS BLV	_	2.2 NAME		Change	Addition
CITY-ST-ZIP-		D	2.2 NAME 2.3 STREET ADDRESS		Change	Addition
TITLE MAN	-PALM CITY-FL	- ب مدید سیمینید از پی میستنو میسید می	2.3 STREET ADDRESS			
	THE US OR WAS A	DELETE	2.3 STREET ADDRESS		☐ Change	Addition
NAME 3	green, case of the contract	- ب مدید سیمینید از پی میستنو میسید می	2.3 STREET ADDRESS -2.4 CITY-ST-ZIP			
NAME STREET ADDRESS	MEND, CRIES CONTROL OF A CONTRO	- ب مدید سیمینید از پی میستنو میسید می	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
STREET ADDRESS CITY+ST-ZIP	green, carre	OELETE ○	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Change	Addition
STREET ADDRESS CITY-ST-ZIP	MESO, LAMB C PERSONALISMOS NO ACAD ACITA DA RATIO	- ب مدید سیمینید از پی میستنو میسید می	2.3 STREET ADDRESS -2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	では、 では、 では、 では、 では、 では、 では、 では、	Change	Addition
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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 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 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.