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 Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90215 016 ***150.00

DOCUMENT # P94000082384

1. Corporation Name

STATE WIDE POORING SERVICE INCORPORATED

UINIL	VIDE HOOFING SERVICE IN	CON ONAILD						
Oringinal Place	o of Puninger	Mailina Addres						180 5 10
Principal Place of Business Mailing Address								
1817 NW 21ST STREET 1817 NW 21ST STREET POMPANO BEACH FL 33069 POMPANO BEACH FL 33069								
US US			JII 1 E 00000			DO NOT WRITE IN THIS SPACE		
- -						3. Date Incorporated or Qualifed		
	•					11/07/1994		
2. Principal P	lace of Business	2a. Mailing Add	iress			4. FEi Number		Applied For
21		26				65-0533807		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	#, etc.				\$8.7	5 Additional
22		27				5. Certificate of Status DesiredL	Fee	Required
City & Stat	e .	City & State				6. Election Campaign Financing	\$5.0	00 May Be
23		28				Trust Fund Contribution		ed to Fees
Zip	Country	Zip		Country		8. This corporation owes the current	year Intangible	
24	25	29	30)		Personal Property Tax.	Yes	□No
<u>1</u>	9. Name and Address of Current					10. Name and Address of New Regi	stered Agent	
			-	81	Name			
BALT	rar, levindfo e				<u> </u>	i (0.0 p. Nissel . i Make Anti-		
9647 S.W. 13TH PLACE				82	Street A	ddress (P.O. Box Number is Not Acceptable	,	
BOC	A RATON FL 33428			83				
				84	City	· · · · · · · · · · · · · · · · · · ·	FL 85 Z	Zip Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligati Signature, typed or printed name of registered agent	of Florida, Such cha ions of, Section 607	nge was autho '.0505, Florida	orized by Statutes	the corpor	orporation submits this statement for the pur ation's board of directors. I hereby accept the	pose of changing e appointment as	i its registered s registered
12.	OFFICERS AND		(11012.709)	13.	K digitalia is	ADDITIONS/CHANGES TO OFFICE		CTORS IN 12
TITLE .	P		DELETE	1.1 TITLE		7,00171011010110101010101010101010101010	☐ Chan	
NAME	BAITAR, LEVINDOO E	_	1	1.2 NAME				
· ·	9647 SW 13TH PLACE			1.3 STREET	T ADDDCCC			1
STREET ADDRESS	,				ļ.		•	
CITY-ST-ZIP	BOCA RATON FL 33428		DELETE	1.4 CITY-S	T-ZIP		Chan	nge
TITLE	M	<i>)</i> *,	DELETE	2.1 TITLE	· <u>·</u>			.90
NAME	LENGS DOS, SANTOS			2.2 NAME				
STREET ADDRESS	1240 S. MIERTARY TRAIL, APT 1	116	ı	2.3 STREET	ADDRESS			i
CITY-ST-ZIP	DEERFIELD BEACH FL 33442			2. 4 CITY-S	T-ZIP		F101	- C Addition
TITLE	Τ .,	- 1	DELETE	3.1 TITLE		·	Chan	ige 🔲 Addition
NAME	FERNANDEZ, CLAUDIO		1	3.2 NAME				ł
STREET ADDRESS	3109 NW 3RD APT. 3			3.3 STREET	ADDRESS			ļ
CITY-ST-ZIP	POMPANO BEACH FL 33064			3.4. CITY-S	T-ZIP			
TITLE			DELETE	4.1 TITLE			Chan	ige 🗀 Addition
NAME	-			4. 2 NAME				
STREET ADDRESS	<u> </u>			4.3 STREET	ADDRESS			
CITY-ST-ZIP			,	4.4 CITY-S				
TITLE			DELETÉ	5.1 TITLE			☐ Chan	ige 🗌 Addition
NAME				5.2 NAME				1
STREET ADDRESS				5.3 STREET	T ADDRESS			,
	{		ł	5.4 CITY-S	ł			İ
CITY-ST-ZIP			DELETE	6.1 TITLE			Chan	ige Addition
14 I links	1	و ليها و						

CITY-ST-ZIP 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS