FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # **P96000002669**

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90132 022 ***150.00

	TALENT MANAGEMENT, IN	IC.			
Principal Place		Mailing Address			
513 N STATE R		4689 NW 9TH AVE POMPANO BCH FL 33064			
MARGATE FL 3	3063	US		DO NOT WRITE IN THIS SPACE	
00		50		3. Date Incorporated or Qualifed	
				01/09/1996	
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For	_7
	NIW 84 Street	26 7401 NW 84	Street	65-0644092 Not Applicat	le
Suite, Apt.	1000 B 1 C 1	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
22		27		1 60 110441104	_
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be	1
23 Tama	arac, fl	28 Jamarac L	<u> </u>	Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax	
<u> 24</u> <u>333</u>		29	LUS_	1 Crooman Fropulary Tark	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent	
DICL	I DAVAD I		81 Name	Aimee Davidow	}
RICH, DAVID L			82 Street	Address (P.O. Box Number is Not Acceptable)	
513 NORTH STATE ROAD 7			<u> </u>	1401 NW 84 Street	
MAH	GATE FL 33063		83		1
			84 City	85 Zip Code	\neg
				Tamarac FL 33331	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the above-named	corporation submits this statement for the purpose of changing its registered	1
agent. La	m familia, with, and accept the obliga	itions of, Section 607.0505, Florida	a Statutes.	oration's board of directors. I hereby accept the appointment as registered	Į
SIGNATURE	Ith mill-	- H. Davidow	Preside	ent	
	Signature, typed or printed name of registered age		gistered Agent signature r		
12		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSVD	(Mr Delete	1.1 TITLE		
NAME	RICH, NANCY C		1.2 NAME	Aimee Davidow 7401 NW84 Street	
STREET ADDRESS	4913 OXFORD CIRCLE		1.3 STREET ADDRESS	1401 NW84 SIECE	
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 CITY-ST-ZIP	Tamarac, FL 33321	ition
TITLE		DELETE	2.1 TITLE	C change C Aud	1011
NAME	RICH, NANCY C		2.2 NAME		
STREET ADDRESS	4913 OXFORD CIRCLE		2.3 STREET ADDRESS		- 1
CITY-ST-ZIP	BOCA RATON FL 33434		2. 4 CITY-ST-ZIP	☐ Change ☐ Add	ition
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Add	nO11
NAME]		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		1
CITY-ST-ZIP			3.4. CITY-ST-ZIP	Change Add	ition
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NAME			52 NAME		ļ
STREET ADDRESS			5.3 STREET ADDRESS		Ì
CITY-ST-ZIP			5.4 CITY-ST-ZIP	∵ ☐ Change ☐ Add	ition
TITLE		☐ DELETE	6.1 TITLE	Change Add	IUUII
NAME			6.2 NAME		ļ
CTOCCT ADDDCCC	1		6.3 STREET AODRESS]

6.4 CITY-ST-ZIP 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 of the corporation of the corporation of 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 of the corporation of the corpo

SIGNATURE: