## 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

## DOCUMENT # P96000077137

**FILED** Jun 04, 1999 8:00 am Secretary of State

06-04-1999 90006 035 \*\*\*150.00

30	TH STREET	CORP.			
	e of Business	Mailing Address	_	()	
1201	SO, OCEAN DR.	+20/	SO OCEAN DR		
4011	YWOOD FL 330	19 401140	MN-E1 32019		
., .	1 30	1 11011920	וושל אל עש	DO NOT WRITE IN THI	S SPACE
		·		05/07/97	
	lace of Business	2a. Mailing Address	<u> </u>	4. FEI Number	Applied For
	1 SO, OCBAN DR		OCEAN DR	65-0697050	Not Applicable
Suite, Apt.	*, etc. 2305 N	Suite, Apt. #, etc.	305 N	5. Certificate of Status Desired	\$8.75 Additional
City & Stat	6	City & State	<del></del>		Fee Required
21Holl	YWOOD FL	28 Hollywoo	OFL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33 0	Country	Zin	Country	8. This corporation owes the current year in	
24 220			30 BROWARD	Personal Property Tax.	∐Yes ∑Kuo
	9. Name and Address of Current	Registered Agent	04 11	10. Name and Address of New Registered	Agent
ANT	MAN STEVEN		81 Name		
	1 S. OCEAN DRIVE		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	<del></del>
APT,	. 2305-N		83		
Hi	DILYWOOD FL 3	3019			
	I	·	84 City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 807.1508, Florida Statut	tes, the above-named corpo	Continue authority that a to the continue of t	f changing its registered
	im familiar with, and accept the obligati			oraign submits this statement for the purpose or on's board of directors. I hereby accept the appo	Intment as registered
SIGNATURE				•	
OLO MAY DUVE					
	Signature, typed or printed name of registered agent		: Registered Agent signature requires		
12.	OFFICERS AND	DIRECTORS	13.	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
12.	OFFICERS AND		13. 1.1 TITLE		ND DIRECTORS IN 12
12.	OFFICERS AND	DIRECTORS	13. 1.1 TILE 1.2 NAME		
12. TIFLE NAME	SOP ANTMAN, STEVEN	DIRECTORS	13. 1.1 TITLE		
12. TITLE NAME STREET ADDRESS	SDP ANTMAN, STEVE H 1201 SOUTH OCEAN DRIVE	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		
12. TITLE NAME STREET ADDRESS CITY-ST-ZF	SDP ANTMAN, STEVE H 1201 SOUTH OCEAN DRIVE	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change ( Additio
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