## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P98000025730

## FILED Sep 22, 1999 8:00 am Secretary of State

09-22-1999 90006 048 \*\*\*550.00

	ES 'N MORE SOUTH, INC.							<b>         </b>
								( <b>  1144</b>   (     14 (   <u>1</u> 4 (
Principal Place	e of Business	Mailing Address					7,0-7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2700 W OAKLAND PARK BLVD. SUITE 27500 2700 W OAKLAND PARK BLVD.				IITE 27	500			
FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311			3311			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		•
						03/18/1998		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 65-0/83682		Applied For	
21		26			65-0100682		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	<b>\$8.7</b>	5 Additional
22 -		27				5. Gertinicate of Grands Desired	Fee	Required
City & State	e	City & State				6. Election Campaign Financing		<b>00</b> May Be
23		28				Trust Fund Contribution	لب <u>Add</u>	ed to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current ye		MNo
24	25	29	30			Intangible Personal Property.  10. Name and Address of New Regist	Yes Accept	F 140
	9. Name and Address of Curre	iit Registered Agent		81 N	ame	10. Name and Address of New Regis	iereu Agent	
RA	COW, MARILYN							
204	195 SAUSALITO DRIVE			<b>82</b> S	treet Addr	ess (P.O. Box Number is Not Acceptable)		
ВО	CA RATON FL 33498		}	83				
				<b>84</b> C	ity		FL 85 Z	Zip Code
11. Pursuant	to the provisions of sections 607 050	02 and 607.1508. Florida State	utes, the abo	ve-nar	ned corpo	ration submits this statement for the purpose	of changing its	s registered
office or	registered agent, or both, in the State	e of Florida. Such change wa	s authorized	by the	corporati	on's board of directors. I hereby accept the	appointment as	s registered
J	am familiar with, and accept the oblig	jations of, section 607.0505,	rivilua Giali	Jies.				
SIGNATURE								
JIGNATURE .	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE: Register	ed Agent	signature requ	· <b></b>	PATE	
12.		ant and title if applicable. ND DIRECTORS	(NOTE: Register	ed Agent	signature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	
		•••			1 100	ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	ge 🔀 Addition
12.		ND DIRECTORS	13. 1.1 TIT 1.2 NA	LE	100	ADDITIONS/CHANGES TO OFFICE PRESIDENT MARTLY WAR FOR MARKET	Change Bluis	ge 🛚 Addition Str. 2750 D
12. TITLE		ND DIRECTORS	13. 1.1 TIT 1.2 NA	LÉ	100	ADDITIONS/CHANGES TO OFFICE PRESIDENT MARTLY WAR FOR MARKET	Change Bluis	ge 🛚 Addition Str. 2750 D
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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 manged, or on an attachment with an address.

SIGNATURE:

954 735-0902