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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000039026

SEIDEN, ALDER, ROTHMAN & PETOSA, P.A.

OLIDEIN,					
Principal Place	of Business	Mailing Address			1 10011041 1/6 14110
2300 GLADES R	OAD. WEST TOWER	2300 GLADES ROAD. WEST	TOWER		
SUITE 340 SUITE 340 BOCA RATON FL 33431 BOCA RATON FL 33431					DO NOT WRITE IN THIS SPACE
BOCA RATON FL 33431 BOCA RATON FL 33431					3. Date Incorporated or Qualifed
					04/24/1998
	(2)	2a. Mailing Address			4 FE Number Applied For
2. Principal Place of Business		<u>⊢</u> -; *			65-0832453 Not Applicable
21		Suite, Apt. #, etc.			_ \$8.75 Additional
Suite, Apt. #, etc.		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
¬ ′		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible
_ `	25	├ -	30		Personal Property Tax.
24	9. Name and Address of Curre				10. Name and Address of New Registered Agent
	g. Name and Address of Care		81	Name	
SEID	SEIDEN, ANDREW 2300 GLADES ROAD, WEST TOWER SUITE 340 BOCA RATON FL 33431				
		₹	82	Street Add	dress (P.O. Box Number is Not Acceptable)
			83		
500.			84	City	FL 85 Zip Code
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag	ations of, Section 607.0505, Florid	inonzed by da Statutes	ine corporati	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change ☐ Addition
NAME	SEIDEN, ANDREW		1,2 NAME		
STREET ADDRESS	2300 GLADES ROAD, WEST 1	OWER. #340	1.3 STREE	T ADDRESS	- 1
	BOCA RATON FL 33498		1.4 CITY-S	iT-7IP	Boca Ration FL 33431 AlChange Addition
CITY-ST-ZIP TITLE	D	☐ DELETE	2.1 TITLE		Bock Latur FL 33431 Al Change Addition
	ALDER, WAYNE M	_	2.2 NAME	ļ	· · · ·
NAME	2300 GLADES ROAD, WEST	FOWER #340		TADDRESS	Λ
STREET ADDRESS	BOCA RATON FL 33498	1011L11, # 545	2. 4 CITY-5		Baca Katen FL 33431
CITY-ST-ZIP	D	☐ DELETE	3.1 TITLE	31-21	Change Addition
TITLE	ROTHMAN, JOEL B	<u></u>	3.2 NAME	Ì	
NAME	2300 GLADES ROAD, WEST	TOWER #340		T ADDRESS	Boca Ration FL 33431 Change Addition
STREET ADDRESS	BOCA RATON FL 33498	OHEN, #040	3.4. CITY-		Duca Calm F1 33431
CITY-ST-ZIP	D	☐ DELETE	4.1 TITLE	31-24	Change Addition
TITLE	PETOSA, FRANK M	5 011271	4. 2 NAME	- (
NAME	2300 GLADES ROAD, WEST	TOWED #340	1	I .	A = 10 /
STREET ADDRESS	BOCA RATON FL 33498	OHEN, #540	4.4 CITY-S	T 7/0	Bock Latin FC 33431
CITY-ST-ZIP	BUCK HATON FL 33490	DELETE	5.1 TITLE	31-ZIF	Change Addition
TITLE	l		5.2 NAME		
NAME			B .	TADORESS	•
STREET ADDRESS			5.4 CITY-S		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE			62 NAME		
NAME				T ADDRESS	

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

561-416-0170 Daytime Phone #