PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000056296

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90025 039 ***150.00

PHIL-AM MODELING, INC.			A PROGRAM CAN MAKE LEGAL MAKE MAKE MAKE MAKE MAKE MAKE MAKE MAKE	
Principal Place of Business	Mailing Address		אווסס וווסס וווסס וווסס וווסט ופרסי פני ובסקוסטיים וויסס וווסס וווסס וווסס וווסס וווסס וווסס וווסס וווסס וווסס	A BELIAN DIELD YIDAN TRASH MEUR LAND
1283 NW 108 AVE	1283 NW 108 AVE			
PLANTATION FL 33817) PLANTATION FL 33317)				
	مد		DO NOT WRITE IN THIS	S SPACE
			3. Date Incorporated or Qualified 06/22/1998	
2. Principal Place of Business	2a. Mailing Address	. 	4. FEI Nu nber	Appiled For
21 1783 NW 108 Ave- Suite, At 1. #, etc.	26		6:5-0849419	Not Applicable
Suite, A; t. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Aciditional Fee Required
City & State	City & State		6. Election, Campaign, Financing	\$5.00 Alay Be -
23 Plantation, FL	28		Trust F and Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year in	I
24 33322 25	29 33322	30	Person at Property Tax.	Yes []No
9. Name and Address of Curren	i Registered Agent	-	10. Name and Address of New Registere	Agent
NIX, GARY		81 Name		
1293 NW 108 AVE		82 Street Ad	tress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 333 <u>17</u>)		83		}
		84 City		85 Zip Code
			FL	- 33322
11. Pursua it to the provisions of Sections 607.050; office or registered agent, or both, in the State agent, I am familiar with, and accept the obligat	o Florida, Such change was a tions of, Section 607.0505, Florida	uthorized by the corpora- rida Statutes.	tion's board of cirectors. I hereby accept the appo	intment as registered
SIGNATUR 5 Signature, typed or printed net is of registered agen		; Registered Agent signature requ		ND CODECTOR OF IN 12
Signature, typed or printed net is of registered agent 12. DFFICERS AN	C DIRECTORS	13.	ADDITICINS/CHANGES TO OFFICERS /	ND DIRECTOFS IN 12
Signature, typed or printed net se of registered agent 12. DFFICERS AN		13. 1.1 TITLE	100 11111111111111111111111111111111111	ND DIRECTOF S IN 12 Change Addition
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indicated on this annual report or supplemental innual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I im all officer or director of the corporation or the receiver of 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.

SIGNATURE: _

HIGHATT RE AND TYPED OR TRINITED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/79

(154) 476-8486