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PROFIT. CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000056996

1. Corporation Name

ANDREW FRANKLIN COMPANY

May 04, 1999 8:00 am Secretary of State

05-04-1999 90126 030 ***158.75

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Principal Place	e of Business	Mailing Address				(\$0088001)	8 18181 18111 80114 6 8111 8	Bilt Balat al	(IN NIII (NII)	8 (8)(# 8)(+ 18))
155 NE 38 STREET STE 16 MIAMI FL 33137		155 NE 38 STREET STE 16			1					
		MIAMI FL 33137					DO NOT WRITE IN THIS SPACE			
						3. Date Incorpora	ated or Qualifed		'	
ļ !						06/24/1998	}			
2. Principal P	lace of Business	2a. Mailing Addre	şs			4. FE Number	C. c.		A	pplied For
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Suite, Apt.	#, etc.	Suite, Apt. #,	etc.			5. Certifcate of S	tatus Desired	1	*	Additional
22	<u> </u>	27								equired
City & Stat	e,	City & State				6. Election Camp	1			May Be
23		28				Trust Fund Co				to Fees
Zip	Country	Zip		Country		8. This corporate Personal Prop	on owes the current		ngible ∐Yes	□No
24	9. Name and Address of Current	29	30				dress of New Reg			
	9. Name and Address of Correct	t Registered Agent		81	Name	70. Hame and				
COR	RPORATE CREATIONS ENTERPRIS	SES INC				<u> </u>				
	1 PGA BLVD STE 211			82	Street A	ddress (P.O. Box Numb	er is Not Acceptable	e)	· .	Ì
	M BEACH GARDENS FL 33418			83			<u>.</u>			
										
· ຢູ				84	City			FL	85 Zip	Code
l ≒office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 607.1508, Florid	la Statutes, the	e above	-named o	corporation submits this s	tatement for the put	rpose of c	hanging its	s registered egistered
agent. I a	m familiar with, and accept the obligation	ions of, Section 607.0	ie was authori	tatutes.	tne corpo	ation's board of director	s. Thereby accept in			
agent. I a	im familiar with, and accept the obligat	ions of, Section 607.0	je was authori 505, Florida S	tatutes.	the corpo	quired when reinstating)	· · · · · · · · · · · · · · · · · · · ·	DATE		
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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 changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS