**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCL	JMENT	#	S50	0660

Principal Place of Business					
7380 61ST ST.					
VERO REACH EL 32967					

## Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90159 019 \*\*\*150.00

Principal Place of Business 7390 61ST ST. VERO BEACH FL 32967  PSOCODO  Mailing Address 7380 61ST ST. VERO BEACH FL 32967											
							<ol> <li>Date Incorporated or Qualified 05/06/1991</li> </ol>				
a Dringing D	lace of Business	2a. Mailing Address				-	4. FEI Number		T	Applied Fo	<del>,                                    </del>
2. Filliopai F	lace of Gualiloss	26				- 1	59-3063511			Not Applica	ble
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_				5. Certificate of Status Desired			Additiona	J
22		27	_			:	5. Certificate of Status Desired	<u> </u>	Fee	Required,	
City & Stat	е	City & State					6. Election Campaign Financing Trust Fund Contribution		•	O May Be d to Fees	
Zip	Country	Zip	Cou	ntry			3. This corporation owes the curr	ent year Inta	ngible		
24	25	29	SÕ				Personal Property Tax.		X Yes		
3.hL	9. Name and Address of Current	Registered Agent				1	<ol> <li>Name and Address of New F</li> </ol>	Registered A	gent		
				81	Name						
	SON, ARTHUR B.	Box 2630	- 1	82	Street	Address	(P.O. Box Number is Not Accepta	able)			
	SOUTH PATRICK DR. T. C.	relbourne FL 32902	}								
	ELLITE BEACH FL 32937- /Y	22902		83						•	( •
	C. HINGINGS PILLS	52 /02		84	City	•			85 Z	p Codei '	
Meli	bourne, FL 32901				•			FL_	ـبـــــــــــــــــــــــــــــــــــــ	· · · · · · · · · · · · · · · · · · ·	<u>:-</u>
11. Pursuant office or r agent, I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with, and accept the obligation	and 607.1508, Florida Statute f Florida, Such change was au ons of, Section 607.0505, Flori	s, the at thorized da Statu	by tos.	-named the corpo	corporati oration's	board of directors. I hereby accep	purpose or continue the appoin	nanging tment as -	registered	_
SIGNATURE							n reinstating)	DATE			- 1 -
	Signature, typed or printed name of registered agent OFFICERS AND		13.	-0011	Segrado V	adoneo mie	ADDITIONS/CHANGES TO OF		DIREC	TORS IN 1	2 8
12. TILE	DP CTTGETG 7412	DELETE	1,1 111	LE		Γ			Chang		dition =
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NAME	NIEHAUS, CHARLOTTE		22 NA	2.2 NAME		ĺ					
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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), Fiorida 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 tegal affect as if made under eath; 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 Statutas; 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.