FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # L17855

MANAGEMENT AND FINANCIAL	STRATEGIES, INC.	
Principal Place of Business	Mailing Address	
% ALLAN A. CATANZARO 2508 BAYVIEW DR FORT LAUDERDALE FL 33305	% ALLAN A. CATANZAR 2508 BAYVIEW DR FORT LAUDERDALE FL	-
2. Principal Place of Business	2a, Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
22	~ 27	
City & State	City & State	
23	28	
Zip Country	Zip	Country Country

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90110 004 ***150.00



								 			
Principal Place	e of Business	Mailing A	ddress			}					
% ALLAN A. CATANZARO % ALLAN A. CATANZARO					1						
2508 BAYVIEW DR 2508 BAYVIEW DR				_			DO NOT WRITE IN THE CRACE				
FORT LAUDERDALE FL 33305 FORT LAUDERDALE FL 33305				I			DO NOT WRITE IN THIS SPACE				
						3.	Date Incorporated or Qualifect	•			
		T a 44-315-	- Addres			-	09/22/1989 FEI Number	- 	1	oplied For	
2. Principal P	lace of Business	—	g Address			4.	· ·				
21		26	A - 6 - 16 - 1 - 1				65-0148584			ot Applicable	
Suite, Apt.	#, etc.	⊢	Apt. #, etc.			₋ 5.	Certificate of Status Desired			Additional [
22		27	· ·							 -	
City & Stat	e ·	City &	State			6.	Election Campaign Financing			May Be to Fees	
23		28		C			Trust Fund Contribution			to rees	
Zip	Country	— <u> </u>	Zip Country			8.	8. This corporation owes the current year Intangible Personal Property Tax				
24	25	29	30	<u> </u>			Personal Property Tax.	Domintore d			
· <u>-</u>	9. Name and Address of Cur	rent Registered /	gent	81	Name	10.	Name and Address of New	Kedistered	Agent.		
CAT	ANZADO ALLANIA			اقا	Name]	
	ANZARO, ALLAN A			82	Street A	Address (P	O. Box Number is Not Accep	able)			
	BAYVIEW DR						-	·			
FIL	AUDERDALE FL 33305			83							
				84	City				85 Zip	Code	
					-			FL	.		
office or r	to the provisions of Sections 607. egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Suc ligations of, Sectio	n 607.0505, Florida	orized by Statutes	tne corpo	ration's bo	ard of directors. I hereby acce	ept the appoi	ntment as re	egistered	
	Signature, typed or printed name of registered				signature re	quired when re	ADDITIONS/CHANGES TO O		ID DIRECTO	DRS IN 12	
12.		AND DIRECTORS	DELETE	13.		DE T	ADDITIONS/CHANGES TO O		CLA	ddition	
TITLE	D CATANTARO ALLANIA		C) Defere			سسيبر	7,1-1		- (
NAME	CATANZARO, ALLAN A.			1.2 NAME							
STREET ADDRESS	2508 BAYVIEW DR			1.3 STREET	- 1						
CITY-ST-ZIP	FORT LAUDERDALE FL		DOLETE	1.4 CITY-S	r-zip	· · ·			Change	Addition	
TITLE	•		☐ D€LETE	2.1 TITLE							
NAME				2.2 NAME						•	
STREET ADDRESS				2.3 STREET	ADDRESS						
CITY-ST-ZIP				2.4 CITY-S	T-ZIP					T A daller	
TITLE			☐ DELETE	3.1 TITLE					☐ Change	Addition	
NAME				3.2 NAME							
STREET ADDRESS				3.3 STREET	ADDRESS						
CITY-ST-ZIP				3.4. CITY-S	T-ZIP						
TITLE			☐ DELETE	4.1 TITLE	1				Change	☐ Addition	
NAME	•			4. 2 NAME		•					
STREET ADDRESS				4.3 STREET	ADDRESS					+	
CITY-ST-ZIP				4.4 CITY-S	r-ZIP		·				
TITLE			☐ DELETE	5.1 TITLE					Change	☐ Addition	
NAME				5.2 NAME	- 1					{	
STREET ADDRESS				5.3 STREE	ADDRESS						
CITY-ST-ZIP			ļ	5.4 CITY-S	r-zip					ļ	
TITLE	<u> </u>	hu bee	DELETE	6.1 TITLE		****			☐ Change	Addition	
NAME				6.2 NAME							
				6.3 STREET	ADDRESS						
STREET 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 of supplemental angular 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 computation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corr Block 12 or Block 13 if char

6.4 CITY-ST-ZIP

SIGNATURE: