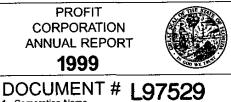
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

A M OF PROMINED CORP

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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

04-14-1999 90034 023 ***150.00

| Cawic | OF BROWARD CORF. | | | | | | |
|---|--|--|--------------------------|----------------------------|--|-------------------------|-----------------|
| Principal Place | e of Business | Mailing Address | | | . (neildri die 18114 (nedat driid)tara tait ara | 16 M4M41 M1M11 A1M11 M1 | 1911 81611 1061 |
| 10000 STIRLING RD. 10000 STIRLING RD. | | | | | | | |
| SUITE 5 SUITE 5 | | | | DO NOT WRITE IN THIS SPACE | | | |
| COOPER CITY FL 33024 COOPER CITY FL 33024 | | | | | 3. Date Incorporated or Qualifed | IIS SPACE | |
| US | : | US | | | 09/04/1990 | | |
| 5 6 : : 1 6 | | 2a. Mailing Address | | | 4. FEI Number | TAN | plied For |
| | | | | | 65-0216119 | | t Applicable |
| 26 Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | \$8.75 A | |
| <u> </u> | | | | | 5. Certifcate of Status Desired | Fee Red | |
| City & Stat | e · · | - City & State | | | 6: Election Campaign Financing | \$5.00 | May Be |
| 23 | | 28 | | | Trust Fund Contribution | Added to | , |
| Zip | Country | Zip | Countr | y | 8. This corporation owes the current year | Intangible | |
| 24 | 25 | 29 3 | 0 | | Personal Property Tax. | | □No |
| | 9. Name and Address of Curren | t Registered Agent | | | 10. Name and Address of New Register | d Agent | |
| | | | 81 | 1 Name | | | |
| BONFIGLIO, CHARLES | | | | 2 Street Addr | ess (P.O. Box Number is Not Acceptable) | | |
| 10000 STIRLING ROAD | | | | | | | |
| SUITE 5 | | | [83 | 3 | | | |
| COC | OPER CITY FL 33024 | | 84 | 4 City | | . 85 Zip C | Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, | | | | 1 1 | | L | |
| office or r | registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered agent | of Florida. Such change was autitions of, Section 607.0505, Florid | horized by la Statute | v the corporatio | on's board of directors, i hereby accept the ap- | oointment as reg | jistered |
| 12. | | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | RS IN 12 |
| TITLE | PD | ☐ DELETE | 1.1 TITLE | | | ☐ Change | Addition |
| NAME | BONFIGLIO, CHARLES | | 1.2 NAME | <u>.</u> | | | |
| STREET ADDRESS | 10000 STIRLING RD #5 | | 1.3 STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | COOPER CITY FL | | 1.4 C/TY- | ST-ZIP | | | |
| TITLE | | ☐ DELETE 2.1 | | | | ☐ Change | ☐ Addition |
| NAME | 221 | | 2.2 NAME | <u>.</u> | | | |
| STREET ADDRESS | ·. | | 2.3 STRE | ET ADDRESS | | | |
| CITY-ST-ZIP~ | The second secon | * more new . | 2. 4 CITY- | -ST-ZIP | | | |
| TITLE | | ☐ DELETE 3.1 | | | | Change | ☐ Addition |
| NAME | 32 N | | 3.2 NAME | : } | | | |
| STREET ADDRESS | 1 | | 3.3 STRE | ET ADORESS | | | |
| CITY-ST-ZIP | | | 3.4. CITY- | -ST-ZIP | | | |
| TITLE | | , 🔲 DELETE | 4.1 TITLE | | | ☐ Change | ☐ Addition |
| NAME | | | 4. 2 NAMI | E | | | |
| STREET ADDRESS | · | | 4.3 STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | · | | 4.4 CITY- | ST-ZIP | | <u></u> | |
| TITLE | | ☐ DELETE | 5.1 TITLE | I | | Change | Addition |
| NAME | · . | | 5.2 NAME | I | | | • |
| STREET ADDRESS | | | | ET ADDRESS | | | |
| CITY-ST-ZIP | · | | 5.4 CITY+ | | *** | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | i | | Change | Addition |
| NAME | | • | 6.2 NAME | | | | |
| CTDEET ADDDESS | J | | 6.3 STRE | ET 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

CR2E034 (11/98)