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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S15912

1. Corporation Name 2413, INC.

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1	
	Principal Place of Business

Mailing Address

2411 S FEDERAL HAVY

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90099 018 ***158.75



FT. LAUDERDAL	E FL 33316-3951	FT. LAUDERDALE FL 33316-3951 US			DO NOT WRITE IN THIS SPACE				
		00	<i>7</i> 0		3. Date Incorporated or Qualifed				
					11/29/1990				
2. Principal Pla	2a. Mailing Address			4. FEI Number	Ap	plied For			
	ace of business	26			10 17 18 18 18 18 18 18 18 18 18 18 18 18 18		t Applicable		
Suite, Apt. i	# oto	The state of the s	Suite, Apt. #, etc.		,	\$8.75			
22 Suite, Apt. 1	#, etc.	27	7		5. Certificate of Status Desired Fee Required				
City & State)	City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
23 28 .				<u></u>	Trust Fund Contribution		to Fees		
Zip	Country	Zip	Country	1	8. This corporation owes the current year Intangible				
24	25	29 30	<u> </u>		Personal Property Tax. Yes No				
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent					
			81	Name					
	HERT, H. F., JR.		82	Street Addr	ress (P.O. Box Number is Not Acceptable)				
	S FEDERAL HWY			0.00011.001					
FT. L	AUDERDALE FL 33316		83						
			84	City	FL	85 Zip (Code		
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named corp	poration submits this statement for the purpose of ch	anging its	registered		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered									
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Pa	oletered Age	nt signature require	d when reinstating) DATE		<u>[</u>		
12.	OFFICERS AND		13.	int arguizatio redoire	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12		
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	_		1.2 NAME				_		
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NAME			6.2 NAME						
STREET ADORESS			6.3 STREE	TADDRESS					
	the state of the		64 CITY-5	ST. ZIP					

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.