SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90028 033 ***550.00

| DOCUMENT : | # 142763 |
|------------|----------|

HOLLYWOOD FINANCE CORP.

| | | | | | | FL MINIS BINSI NINIS DENIS DENIS DINIS SUNT | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------|-------------|-------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------|--|
| Principal Place of Business Mailing Address | | | | | | | |
| 2125 HOLLYWOOD BLVD. | | 2125 HOLLYWOOD BLVD. | | | | | |
| P.O. BOX 384 HOLLYWOOD FL 33022 | | P.O. BOX 384 | | DO NOT WRITE IN THIS SPACE | | | |
| HULLTWOOD FI | L 33022 | HOLLYWOOD FL 33022 | | | 3. Date Incorporated or Qualified | TIO OF ACE | |
| | | | | | 02/29/1944 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For | |
| 21 1302 F | illmore Street | 26 P.O. Box 220 | 384 | | 59-0525549 | Not Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional | |
| 22 | | | | | C. Oblandate of Oldred Desired | Fee Required | |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be | | |
| 23 Hollyw | ood, Florida | 28 Hollywood, Florida | | .da | Trust Fund Contribution | Added to Fees | |
| Zip | Country | Zip | Country | | 8. This corporation owes the current year | | |
| 24 33019 | 25 | 29 33022-0384 30 |) | | Intangible Personal Property. | YesNo | |
| | 9. Name and Address of Current | | | | 10. Name and Address of New Register | ed Agent | |
| | | | 81 | | | | |
| CURT | ns,edward C | | 00 | Edward C. Curtis | | | |
| % H0 | OLLYWOOD FINANCE CORP | | 82 | 82 Street Address (P.O. Box Number is Not Acceptable) 1302 Fillmore St. | | | |
| 2125 | HOLLYWOOD BLVD | | 83 | 1302 1 | TITIMOTE SC. | | |
| HOLL | YWOOD FL 33020 | | | | | | |
| | | | 84 | City | | 85 Zip Code | |
| | | 1007 1700 51 11 01 11 | | Hollyw | 700u - | - | |
| 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 registered 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 a | | | gent signature requ | uired when reinstating) DATI | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | PD | <u></u> DELETE | 1.1 TITLE | | | ☐ Change ☐ Addition | |
| NAME | CURTIS, EDWARD | | 1.2 NAME | ĺ | | | |
| STREET ADDRESS | 1302 FILLMORE STREET | | 1.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | HOLLYWOOD, FL 00000 | | 1.4 CITY-ST | -ŻIP | | | |
| TITLE | i VD | DELETE | 2.1 TITLE | } | | Change Addition | |
| NAME | ROSSI, MARY ANN | | 2.2 NAME | | | | |
| STREET ADDRESS | 762 S. GREENWOOD | | 2.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | Kankakee il | | 2.4 CITY-ST | -ZIP | | | |
| TITLE | SD | DELETE | 3.1 TITLE | | | Change Addition | |
| NAME | CURTIS, HENRIETTA G. | ·- | 3.2 NAME | ĺ | | | |
| STREET ADDRESS | 1302 FILLMORE STREET | | 3.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | HOLLYWOOD FL | | 3.4 CITY-ST | | | | |
| TITLE | TD | DELETE | 4.1 TITLE | | | Change Addition | |
| NAME | CURTIS, JAMES, A | | 4.2 NAME | | | | |
| STREET ADDRESS | 570 SE 4TH CT | | 4.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | DANIA FL | | 4.4 CITY-ST | | | | |
| TITLE | DANA | DELETE | 5.1 TITLE | -217 | | Change Addition | |
| | | ☐ DELETE | 5.2 NAME | | | Change Addition | |
| NAME | | | | ADDDEGG | | | |
| STREET ADDRESS | l • | | 5.3 STREET | Į. | | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST | -ZiP | | - | |
| TITLE | | DELETE | 6.1 TITLE | | | Change Addition | |
| NAME | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY-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.

SIGNATURE:

CR2E034 (5/99)