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 # 1. Corporation Name

Principal Place of Business	Mailing Address	
126 E.ORANGE AVE. P.O. BOX 2475 DAYTONA BEACH FL 32115	126 E.ORANGE AVE. P.O. BOX 2475 . DAYTONA BEACH FL 32115	

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90217 006 ***150.00

COMMUI	NITY PROMOTIONS INC							
Principal Place	e of Business	Mailing Address					ARE MANUAL NA	i Bit Biaki Jabi
126 E.ORANGE		126 E.ORANGE AVE.						
P.O. BOX 2475	1100	P.O. BOX 2475 .				DO NOT WRITE IN TUIS SDA	CE	
DAYTONA BEACH FL 32115 DAYTONA BEACH FL 32115					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed			
						07/05/1954		
O Dringing D	and of Divines	2a. Mailing Address				4. FEI Number	An	plied For
	ace of Business	26.				59-6151098		t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				_ \$		Additional
22	m, oto,	27				5. Certificate of Status Desired	Fee Re	
City & State	9	City & State				6, Election Campaign Financing	5.00	May Be
23	•	28					Added t	o Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year Intangit	ole	ا ر
24	25	29	30			Personal Property Tax.		MNo
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Age	<u>ıt</u>	
				81	Name			Ì
	BAL, GEORGE			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
	E. ORANGE AVE							
DAY	TONA BCH FL 32115			83				
				84	City	FL 8	Zip (Code
	607.000	2 and 607 1509 Florida State	utos the e	hove	named com	protion submits this statement for the purpose of char	nging its	registered
office or n	egistered agent or both in the State :	of Florida. Such change was	authorized	1 DV 1	the corporatio	on's board of directors. I hereby accept the appointment	nt as re	gistered
agent. I a	m familiar with, and accept the obligation	tions of, Section 607.0505, F	lorida Stat	utes.				
SIGNATURE	Signature, typed or printed name of registered ager	there is a miles by the standard of the standa	TF: Registered	Ageni	t sičinature requires	d when reinstating) 4-16-99 DATE		———
12.		D DIRECTORS	13.	-		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	RS IN 12
TITLE	V	☐ D£LETE	1.1 TI	πE			Change	☐ Addition
NAME	WEBBER, ROBERT		1.2 N	AME				
STREET ADDRESS	300 FENTRESS BLVD	1.3\$		TREET	ADDRESS			
CITY-ST-ZIP	DAYTONA BCH, FL 00000			ITY-ST	r-ZIP			
TITLE	P	☐ DELETE	2.1 TI	1LE			Change	☐ Addition
NAME	SUSSMAN, HERBERT		2.2 N	AME	}			
STREET ADDRESS	221 SEABREEZE BLVD		2.3 S	TREET	ETADDRESS			Ì
CITY-ST-ZIP	DAYTONA BCH, FL 00000		2.40	iTY-S	T-ZIP			
TITLE	S."''	S DELETE 3.1					Change	Addition
NAME	MIRABAL, GEORGE		3.2 N	AME				
STREET ADDRESS	126 E. ORANGE AVE		33 S	TREET	ADDRESS			
CITY+ST+ZIP	DAYTONA BCH, FL 00000		3.4.0	TY-S	T-ZIP			
TITLE		☐ DELETE	. 4.1 Т	IILE			Change	☐ Addition
NAME			4. 2 N	AME				Ì
STREET ADDRESS	·		4.3 S	TREET	ADDRESS			
CITY-ST-ZIP			4.4 C	ny-st	r-ziP			
TITLE		☐ DELETE	5.1 Ti				Change	☐ Addition
NAME			5.2 N					
STREET ADDRESS			5.3 8	TREET	ADDRESS			
CITY-ST-ZIP				n'Y-ST	T-ZIP			
TITLE		☐ DELETE	6.1 T				Change	☐ Addition
NAME			6.2 N	AME				ļ
STREET ADDRESS			6.3 S	TREET	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:

SIGNATURE REQUIRED SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR