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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 192639

1. Corporation Name

PARTY TIME, DIVISION OF ACADEMY CHAIR RENTING CO

FILED Jan 29, 1999 8:00am Secretary of State

01-29-1999 90027 050 ****150.00



Principal Place of Business Mailing Address								
7711 W 22 AVENUE 7711 W 22 AVENUE					(
HIALEAH FL 33	3016-2518	HIALEAH FL 33016-2518			ì			. N
		• *			DO NOT WRITE	E IN THIS SE	PACE	
·					3. Date Incorporated or Qualifed 04/25/1956		* 3	
Principal Place of Business 2a. Mailing Address		<u> </u>		4. FEI Number		Ar	oplied For	
21 26				59-0791423		No	t Applicable	
		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22 27		27			5. Certificate of Status Desired	□	Fee Re	equired
City & State		City & State		6. Election Campaign Financing 55.00 May Be				
23 28		28			Trust Fund Contribution Added to Fees			to Fees
Zip	Country	Zip	Country	,	8. This corporation owes the current	nt year Intang	gible	• •
24	25	29 30	<u> </u>		Personal Property Tax.	<u> </u>	Tes .	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Ag	ent	
CIEC	M. Duraki a		81	Name				•
	BEL, JULIAN A.	n kanalan sa kabupatèn kacamatan	82	Street Addr	ress (P.O. Box Number is Not Acceptab	lo\ .		
	W. 22ND AVENUE		02	Street Addi	ress (F.O., box Number is Not Acceptab	ing in the second s	with their	
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• • •	,	· •	84	City		Fi	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the abov	e-named corp	poration submits this statement for the p	<u> </u>	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 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 and title if applicable. (NOTE: Re			distant Ade	t cianature require	d when minetaking)	DATE		
				ii signature require				
12.	OFFICERS AND	DIRECTORS	13.	n agnature reduce	ADDITIONS/CHANGES TO OFFI	CERS AND I		
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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 reflevier 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 adachment with an address, with all other like empowered.

SIGNATURE

TAYESTEGED U SECTIFICANT TO THE STATE OF SIGNING OFFICER OF DIRECTOR

1/12/49 305 558 979 8

CR2E034 (11/98)