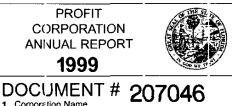
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Apr 29, 1999 8:00 am Secretary of State Katherine Harris

04-29-1999 90054 025 ***150.00

A. A. GF	REEN & CO., INC	,								
Principal Place of Business Mailing Address 3330 NW 125TH ST. 3330 NW 125TH ST. MIAMI FL 30167-2410 MIAMI FL 30167-2410 US US						DO	NOT WRITE IN TH			
C. Defendant D	Disco of Ducines		S - Moiling Addross			3. Date Incorporated of 10/25/1957 4. FEI Number	r Qualifed	Apr	lied For	
2. Principal Place of Business 21 4081 N. W. 58 Street			2a. Mailing Address 26 4081 N.W.	58 St	ract	59-0815031			Applicable	
Suite, Ast. #, etc. 22 BOCL Retou, H.			Suite, Apt. # Story , Fl.			5. Certifcate of Status	Desired	\$8.75 Additional Fee Recuired		
City & Stat 23 334 .9	te	5	City & State 33496	U	5	6. Election Campaign Trust Fund Contribu	- 11	\$5.00 i Added to		
Zip 24	Cour	try	Zip 29	Country 30	у	 This corporation ow Person al Property T 	•	ntangible Yes	Mo	
	9. Name and Add	ess of Current	Registered Agent		-	10. Name and Addres	s of New Registere	d Agent		
				81	Name					
GREEN, RICHARD W. 3330 NW #25 ST. MIAMIJEL 33167					82 Street Acdress (P.O. Box Number is Not Acceptable) 408 / N, 8 5 (CC)					
Mil-Mily E 35 101				0.3	Boc	a Reton				
				84	City		F	85 Zip C	291	
office crr	registered agent, or boom familiar with, and ac	h, in the State of cept the obligation	Florida. Such change was a cons of, Section 607.0505, Floring and title if applicable. (NOT	authorized by orida Statute:	the corpora	rporation submi's this statem tion's board of clirectors. I he ired when reinstating) ADDITIONS/CHANG	DATE	ointment as reg		
TITLE	PD		DELETE 1,					Change	Addition	
NAME	GREEN, RICHARD	W.	_	1.2 NAME						
STREET ADDRESS	ACCA ANAL CO OTREET				TADDRESS					
CITY-ST-ZIP	BOCA RATON FL			1 4 CITY-5	1				!	
TITLE			☐ DELETE 2.1 T					☐ Change	Addition	
NAME			2.2 NA							
STREET ADDRESS				2.3 STREE	TADDRESS				ļ	
CITY-ST-ZIP	}			2, 4 CITY-	Y				}	
TITLE			☐ DELETE 3					Change	Addition	
NAME				3.2 NAME						
STREET ADDRESS	;			3.3 STREE	ET ADDRESS				ŀ	
CITY-ST-ZIP				3 4. CITY-	ST-ZIP					
TITLE	DELETE		4 1 TITLE	i			Change	☐ Addition		
NAME				4 2 NAME	:					
STREET ADDRESS	E3S		4.3 STREE	TADDRESS						
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP					
TITLE	☐ DELETE		5.1 TITLE				Change	Addition		
NAME				5.2 NAME					1	
STREET ADORE 3S					ET ADDRESS					
CITY-ST-ZIP				5.4 CITY-1	ST-ZIP					
TITLE			☐ DELETE	6.1 TITLE				☐ Change	☐ Addition	
NAME				6.2 NAME					ļ	
STREET ADDRE 3S	•			6.3 STREE	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 on the receiver or trustee empowered to execute this report as recuired 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.

SIGNATURE:

SIGNATURE:

SIGNATURE: