## 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 # 257185 1. Corporation Name

MICHAELS REALTY INC

Principal Place	of Business	Mailing Address				- ! !	DOT (TEBY IBUD) BUT B	ABAR MAMAN BANDA NANGA	RINTI NINII TNUI	
·		104 CRANDON BLVD								
104 CRANDON BLVD P.O. BOX 490322 P.O. BOX 490322									;	
KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149							OT WRITE IN T	HIS SPACE		
						3. Date Incorporated or 03/22/1962	Qualifed	· · · · · · · · · · · · · · · · · · ·		
2. Principal Pla	lace of Business	2a. Mailing Address				4. FEI Number		<u> </u>	plied For	ç
21		26				59-0970820			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status D	esired	\$8.75 A	Additional guired	4
22	<i>y</i>	27						<u>.</u>	<u> </u>	
City & State	e	City & State				<ol> <li>Election Campaign Finant Fund Contribution</li> </ol>			May Be to Fees	
23		28	Count	D(		8. This corporation owe			10 1 663	
Zip	Country	Zip 29	30	, ,		Personal Property Ta		Yes	□No	
24	9. Name and Address of Cur		130]			10. Name and Address		red Agent		
	9. Name and Address of Out	· · · · · · · · · · · · · · · · · · ·	. [8	1 Nam	e					
. MICH	HAELS,INGE		Ļ	0 0		(D.O. Bay Number in No	t Assertable)		<del></del> .	
	CRANDON BLVD		1,	Stree	t Addres	ss (P.O. Box Number is No	n Acceptable)	and a second control of		
MIAN	AI FL 33149		1	13		in the second			10 10 10	
			Ļ				विकास के प्रीक्षित है। 13 स्टूटर के किए के किए के	85 Zip	Code	
			1	City				FL │°° │ <sup>∠</sup> ''	Code	
								o of changing its	registered	
11 Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statu	tes, the abo	ve-name	d corpor	ration submits this stateme	nt for the purpos	se or changing its	raiotorod	
	to the provisions of Sections 607.				d corpor poration	ration submits this statemen's board of directors. I her	nt for the purpos eby accept the a	ppointment as re	egistered	
office or re agent: I ar	to the provisions of Sections 607 or egistered agent, or both, in the Stam familiar with, and accept the ob-				d corpor poration	ration submits this stateme n's board of directors. I her	nt for the purpose by accept the a	ppointment as re	egistered	
office or re agent. I ar		ate of Florida. Such change was a ligations of, Section 607.0505, Fk	orida Statut	es.	poration	when reinstating)	DAT	E		
office or re agent. I ar	egistered agent, or both, in the St m familiar with, and accept the ob Signature, typed or printed name of registered	ate of Florida. Such change was a cligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	orida Statut	es.	poration	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	
office or re agent. I an SIGNATURE	egistered agent, or both, in the St m familiar with, and accept the ob Signature, typed or printed name of registered	ale of Florida. Such change was a subjections of, Section 607.0505, Fk	orida Statut	es.	poration	when reinstating)	DAT	E		
office or reagent. I as	egistered agent, or both, in the St m familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS	ate of Florida. Such change was a cligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	erida Statut E: Registered A	gent signatur	poration	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	**************************************
office or reagent: I an SIGNATURE  12.  TITLE	egistered agent, or both, in the Stam familiar with, and accept the ob- Signature, typed or printed name of registered OFFICERS PD	ate of Florida. Such change was a cligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAW	gent signatur	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	
office or reagent: I ail SIGNATURE  12.  TITLE NAME	egistered agent, or both, in the St m familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS PD MICHAELS,INGE	ate of Florida: Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTI AND DIRECTORS	E: Registered A  13. 1.1 TITL 1.2 NAW 1.3 STR 1.4 CITY	gent signatur  E  E  E  E  E  E  E  T  T  T  T  T  T	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	
office or ragent. I as SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	egistered agent, or both, in the Stom familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D	ate of Florida. Such change was a cligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAW	gent signatur  E  E  E  E  E  E  E  T  T  T  T  T  T	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	
office or ragent. I as SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	egistered agent, or both, in the Stom familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA	ate of Florida: Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTI AND DIRECTORS	E: Registered A  13. 1.1 TITL 1.2 NAW 1.3 STR 1.4 CITY	gent signatur  E  E  EET ADDRES	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	
office or reagent. I as SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.	ate of Florida: Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTI AND DIRECTORS	E: Registered A  13. 1.1 TITL 1.2 NAW 1.3 STR 1.4 CIT) 2.1 TITL 2.2 NAW	gent signatur  E  E  EET ADDRES	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	
office or reagent. I as SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA	ate of Florida: Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT	es.  E  E  E  E  E  T  T  T  T  T  T  T  T	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO ☐ Change ☐ Change	DRS IN 12 Addition	
office or reagent. I as SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.	ate of Florida: Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTI AND DIRECTORS	E: Registered A  13. 1.1 TITL 1.2 NAW 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAW 2.3 STR 2.4 CIT 3.1 TITL	gent signatur  E E E E E E E E T T T T T T T T T T T	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO	DRS IN 12	
office or reagent. I as signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.	ate of Florida: Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CIT  3.1 TITL  3.2 NAM	gent signatur  E E E E E E E T T T T T T T T T T T T	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO ☐ Change ☐ Change	DRS IN 12 Addition	
office or reagent. I as signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	ate of Florida: Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAW  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAW  2.3 STR  2.4 CIT  3.1 TITL  3.2 NAW  3.3 STR	gent signatur  E E E E E E E E E E E E E E E E E E	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	DAT	E S AND DIRECTO ☐ Change ☐ Change	DRS IN 12 Addition	
office or reagent. I as SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	age of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CIT  3.1 TITL  3.2 NAM  3.3 STR  3.4 CIT  3.4 CITY	gent signatur  E E E E E E E E E E E E E E E E E E	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	
office or reagent. I as SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	ate of Florida: Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CIT  3.1 TITL  3.2 NAM  3.3 STR  3.4 CIT  4.1 TITL	gent signatur  E E E E E E E E E E E E E E E E E E	e required v	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	S TO OFFICER	E S AND DIRECTO ☐ Change ☐ Change	DRS IN 12 Addition	The state of the s
office or reagent. I as SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	age of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CITT  3.2 NAM  3.3 STR  3.4 CITT  4.1 TITL  4.2 NAM	gent signatur  E E E EET ADDRES -ST-ZIP E E E E ET ADDRES Y-ST-ZIP E E EET ADDRES Y-ST-ZIP E E ET ADDRES	e required s	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	
office or reagent. I an SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	age of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CITT  3.1 TITL  3.2 NAM  3.3 STR  3.4 CITT  4.1 TITL  4.2 NAM  4.3 STR	ent signatur  E E E E E E E E E E E E E E E E E E	e required s	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	
office or reagent. I as SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	ate of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CITT  3.2 NAM  3.3 STR  3.4 CIT  4.1 TITL  4.2 NAM  4.3 STR  4.4 CITY  4.4	E E E E E E E E E E E E E E E E E E E	e required s	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	
office or reagent. I an SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	age of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CITT  3.1 TITL  3.2 NAM  3.3 STR  3.4 CITT  4.1 TITL  4.2 NAM  4.3 STR  4.4 CITY  5.1 TITL  5.1 TITL	gent signatur  E E E EET ADDRESS -ST-ZIP E E EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E	e required s	when reinstating)  ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	
office or reagent. I an SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	ate of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CITT  3.1 TITL  3.2 NAM  3.3 STR  3.4 CITT  4.1 TITL  4.2 NAM  4.3 STR  4.4 CITY  5.1 TITL  5.2 NAM	E E E E E E E E E E E E E E E E E E E	e required s	when reinstating) 1: 1: 1: ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	
office or reagent. I an SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	ate of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CITT 3.1 TITL 3.2 NAM 3.3 STR 4.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR	E E EET ADDRES Y-ST-ZIP E E EET ADDRES Y-ST-ZIP E ME EET ADDRES Y-ST-ZIP E ME EET ADDRES Y-ST-ZIP E ME EET ADDRES (-ST-ZIP E ME EET ADDRES (-ST-ZIP E ME EET ADDRES (-ST-ZIP E ME EET ADDRES	e required s	when reinstating)  ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	\$ 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
office or reagent. I an signature  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	ate of Florida. Such change was a falligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CITT  3.1 TITL  4.2 NAM  4.3 STR  4.4 CITY  5.1 TITL  5.2 NAM  5.3 STR  5.4 CITY  6.4 CITY  6.	E E E E E E E E E E E E E E E E E E E	e required s	when reinstating)  ADDITIONS/CHANGE	S TO OFFICER	E S AND DIRECTO Change Change Change	DRS IN 12  Addition  Addition  Addition  Addition	\$ 100 pt. 100
office or reagent. I an signature  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD  MICHAELS,INGE  104 CRANDON BLVD  MIAMI FL  D  COVERMAN,TINA  77 CRANDON BLVD.  MIAMI FL	ate of Florida. Such change was a colligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  2.3 STR  2.4 CITT  3.1 TITL  4.2 NAM  4.3 STR  4.1 TITL  4.2 NAM  5.3 STR  5.4 CITY  5.1 TITL  5.2 NAM  5.3 STR  5.4 CITY  6.1 TITTL  6.1 TIT	gent signatur  E E E EET ADDRES -ST-ZIP E E E ET ADDRES Y-ST-ZIP E H E EET ADDRES Y-ST-ZIP E H E EET ADDRES (-ST-ZIP E H E EET ADDRES (-ST-ZIP E H E EET ADDRES (-ST-ZIP E H E E E E E E E E E E E E E E E E E	e required s	when reinstating)  ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTO Change Change	DRS IN 12  Addition  Addition	For the second s
office or reagent. I an signature  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the St. m familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  PD MICHAELS,INGE 104 CRANDON BLVD MIAMI FL D COVERMAN,TINA 77 CRANDON BLVD. MIAMI FL	ate of Florida. Such change was a falligations of, Section 607.0505, Fix agent and title if applicable. (NOTI	E: Registered A  13.  1.1 TITL  1.2 NAM  1.3 STR  1.4 CITY  2.1 TITL  2.2 NAM  3.3 STR  3.4 CITY  4.1 TITL  4.2 NAM  4.3 STR  4.4 CITY  5.1 TITL  5.2 NAM  5.3 STR  6.1 TITL  6.2 NAM	gent signatur  E E E EET ADDRES -ST-ZIP E E E ET ADDRES Y-ST-ZIP E H E EET ADDRES Y-ST-ZIP E H E EET ADDRES (-ST-ZIP E H E EET ADDRES (-ST-ZIP E H E EET ADDRES (-ST-ZIP E H E E E E E E E E E E E E E E E E E	e required s	when reinstating)  ADDITIONS/CHANGE	S TO OFFICER	E S AND DIRECTO Change Change Change	DRS IN 12  Addition  Addition  Addition  Addition	F. 1860

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

IAME OF SIGNING OFFICER OR DIRECTOR

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.

**FILED** 

Feb 11, 1999 8:00am

**Secretary of State** 

02-11-1999 90026 045 \*\*\*150.00