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

Mailing Address

C/O JAMES M. HARTLEY

DOCUMENT # 283180

Principal Place of Business

C/O JAMES M. HARTLEY

BEVERLY HILLS INC

4600 SHERIDAN ST. HOLLYWOOD FL 33021		4600 Sheridan St. Hollywood Fl 33021		DO NOT WRITE IN THIS SPACE				
US		US			 Date Incorporated or Qualified 07/13/1964 		,	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		A	applied For
21		26			59-1085698			lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional Required
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
23		28		Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current ye			_
24	25	29 30			Personal Property Tax.		Yes	□No
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Regist	tered Ag	gent	
1143/	DOM BUCCELL M		81	Name	•			
	SON, RUSSELL M.		82	Street Ad	Idress (P.O. Box Number is Not Acceptable)			
	SHERIDAN ST				<u> </u>		_	
HOL	LYWOOD FL 33021		83					}
			84	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607,1508, Florida Statutes, the	he above	-named co	prporation submits this statement for the purpor	ose of ch	anging i	ts registered
office or re agent. I a	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was authorions of, Section 607.0505, Florida:	rized by Statutes.	tne corpora	ation's board of directors. I hereby accept the	аррони	Heili as	egistered
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered agen		stered Agen	t signature requ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ϋ́E		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	PD	_	1.1 TITLE				Change	, Dynamon
NAME	HARTLEY, JAMES M	İ	1.2 NAME					
STREET ADDRESS	4600 SHERIDAN STREET	i i	1.3 STREET					
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST	r-ZIP			☐ Change	Addition
TITLE	D	_	2.1 TITLE	1		ļ	Change	Addition
NAME	SAMPSON, DOROTHY		2.2 NAMÉ					ļ
STREET ADDRESS	515 N. 44TH AVENUE		2.3 STREET	ADDRESS				Ì
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CITY-S	T-ZIP	· · · · · · · · · · · · · · · · · · ·		Chonge	Addition
TITLE	D		3 1 TITLE			ļ	Change	, Magagan
NAME	HAYSON, RUSSELL M.		3.2 NAME					\
STREET ADDRESS	3860 SHERIDAN ST		3.3 STREET	ADDRESS]
CITY-ST-ZIP	HOLLYWOOD FL		3.4. CITY-S	T-ZIP			Change	e
TITLE			4.1 TITLE					- Laddicon
NAME			4. 2 NAME					
STREET ADDRESS		L L	4.3 STREET					
CITY-ST-ZIP			4.4 CITY-S	F-ZIP			Change	Addition
TITLE			5.1 TITLE 5.2 NAME					. Dradition
NAME				ADODESS				ļ
STREET ADDRESS		1	5.3 STREET					{
CITY-ST-ZIP			5.4 CITY-S' 6.1 TITLE	1-417			☐ Change	Addition
TITLE			6.2 NAME				_ 51161191	
NAME		i i	6.3 STREET	ADDRESS				}
STREET ADDRESS								1
CITY-ST-ZIP			6.4 CITY-S	1-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 an an attachment with an address, with all other like empowered.

SIGNATURE:

3-1-99

FILED

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90122 040 ***150.00