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

Mailing Address 2542 SO FEDERAL HWY

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 286994

2542 CORPORATION

LOIL COM CHANGE

Principal Place of Business

2542 SO FEDERAL HWY

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90045 003 ***150.00



BOYNTON BEACH FL 33435		BOYNTON BEACH FL 33435			DO NOT WRITE IN THIS SPACE	
					3. Date incorporated or Qualifed	
10-	-				11/12/1964	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For	
!		26			28-6994600 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>		5. Certificate of Status Desired \$8.75 Additional	
- <u>l</u>		27		_	5, Certificate of Status Desired Fee Required	
City & Stat	ė	City & State		•	6. Election Campaign Financing \$5.00 May Be	
!	·	28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible	
-# <u> </u>	25	29 30			Personal Property Tax. Yes No	
	9. Name and Address of Current	Registered Agent	_		10. Name and Address of New Registered Agent	
D 1 D	ONATO HENRY D		81	Name		
DI DONATO, HENRY R.			82	82 Street Address (P.O. Box Number is Not Acceptable)		
2542 S FEDERAL HWY						
	3 (41) (41) (41)		83			
BOY	NTON BEACH FL 33435		84	City	85 Zip Code	
	in the state of the section in the s			•	FL T	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, tl	he above-i	named corpo	pration submits this statement for the purpose of changing its registered	
office or n	egistered agent, or both, in the State o m, ramil tar with, and accept the obligati	of Florida. Such change was authorions of Section 607.0505. Florida	rized by th Statutes.	ne corporatio	n's board of directors. I hereby accept the appointment as registered	
	dens R. D.	Q and the			2/26/99	
SIGNATURE	Signature, types of printed name of registered agent	and title if applicable. (NOTE: Regis	stered Agent s	signature required	when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE		DIDONATO HENRYR Change Addition	
NAME	DIDONATO, HENRY R.		1.2 NAME		2542 South Fed Huy #3	
STREET ADDRESS	2542 SOUTH FED HWY #3		1.3 STREET A	VUDRESS 🗪	·	
CITY-ST-ZIP	BOYNTON BCH., FL 00000	i i	1.4 CITY-ST-Z	ZIP	364 NTON 18ch FL 33435	
TITLE :	٧	☐ DELETE	2.1 TITLE	A C	VIT KOVIC PETAR Change Addition	
NAME	CUITKOVIC, PGTAR		2.2 NAME	13	542 S Federal Hwy #7	
STREET ADDRESS	2542 S FEDERAL HWY #7	V	2.3 STREET A	IDDRESS -		
CITY-ST-ZIP . 1	BOYNTON BEACH FL 33435	1	2. 4 CITY-ST-	. _{ZIP}	ounton Beach FL 33435	
TITLE	T	☐ DELETE	3.1 TITLE	71-6	Breslin Mitte Change Addition	
NAME	BRESLIN, MIKE	·	3.2 NAME		and the same of the same	
STREET ADDRESS	2542 SOUTH FED HWY, #9		3.3 STREET A	ADDRESS .	2542 South Fed Hwy #9	
CITY-ST-ZIP	BOYNTON BCH., FL 00000		3.4. CITY-ST	.ZIP	BOYNTON BEACH FL 33435	
TITLE	S	☐ DELETE	4.1 TITLE	\$	☐ Change ☐ Addition	
NAME :	DIDONATO, RUTH		4. 2 NAME		Ruth Dibonato	
STREET ADDRESS	2542 S. FED HWY, #3		4.3 STREET A	UDDRESS :	2542 5 Fed 14wy #3	
CITY-ST-ZIP	BOYNTON BCH, FL 00000		4.4 CITY-ST-2	1	BOYNTON BCh FL 33435	
TITLE	D	DELETE	5.1 ΠΠLE	——————————————————————————————————————	Change X Addition	
NAME	DICKERSON, ANN	- \	5.2 NAME		ARMICH JOSEPH	
STREET ADDRESS	2542 SOUTH FED. HWY, #11		5.3 STREET A	NODRESS	2542 Sted 16W4 #6	
	BOYNTON BCH FL	`	5.4 CITY-ST-2		SoyNton Beh FL 33435	
CITY-ST-ZIP	D		6.1 TITLE		Change Addition	
NAME	-		6.2 NAME		THEKSON GUS ME	
NAME QCAS	JACKSON, GUSTAF 	ľ	6.3 STREET A	Inneres 6	2542 S Fed 11W4 #18	

ST-ZIP BOYNTON BEACH FL

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.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/99

(561) 965-4286 Davime Phone #

(2E034 (11/98)

■5555

=:::::