## 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

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90041 024 \*\*\*150.00

1. Corporation RANCHL							
Principal Place	of Business	Mailing Address		I IORINO (1984 IORIA (1986) (1908 VILLA (1910)		11011 81011 1881	
2838 N W 22ND AVE P.O. BOX 650474 MIAMI FL 33265-0474 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  0.4/20/1005			
				04/20/1965			
<b>—</b>	ace of Business	2a. Mailing Address		4. FEI Number 59-1648328		plied For t Applicable	
21	# oto	Suite, Apt. #, etc.			\$8.75		
Suite, Apt.	erc.	27		5. Certifcate of Status Desired	Fee Re	,	
22 City & State	<del></del>	City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added t		
Zip	Country		Country	8. This corporation owes the current year	Intangible		
24	25	29 30		Personal Property Tax.	☐ Yes	<b>™</b> No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent		
BYRNES,BUDDY 2838 NW 22ND AVE MIAMI FL 33142		81 Name 82 Street Add	ress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·			
)				·			
	·		84 City	F	85 Zip C	Code	
11. Pursuant to	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	2 and 607.1508, Florida Statutes, the Florida. Such change was author	ne above-named corp ized by the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its pointment as re	registered gistered	
SIGNATURE		lons of, Section 607. USUS, Horida s	Statutes.	مېدىنى <del>دى ئېدىنى دېزى</del> نىي د د دى.	~~~ <u>~</u> ~~~~	<u>محوت .</u>	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Regis	Statutes.	ed when reinstating) DATE	~ <del>*****</del>	مستخصور	/ (00/
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AN	t and title if applicable. (NOTE: Regis  D DIRECTORS	Statutes.	مېدىنى <del>دى ئېدىنى دېزى</del> نىي د د دى.	~ <del>*****</del>	مستخصور	(44,00)
SIGNATURE 12. TITLE	Signature, typed or printed name of registered agen OFFICERS AN	t and title if applicable. (NOTE: Regis	Statutes.  stered Agent signature require	ed when reinstating) DATE	AND DIRECTO	0RS IN 12	34 (44,00) /
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered agen OFFICERS AN PD BYRNE,ESTHER MORRIS	t and title if applicable. (NOTE: Regis D DIRECTORS	statutes.  tered Agent signature require  13.  1.1 TITLE	ed when reinstating) DATE	AND DIRECTO	0RS IN 12	E024 (44,00) /
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SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered agen OFFICERS AN PD BYRNE,ESTHER MORRIS 2838 N.W. 22ND AVE.	t and title if applicable. (NOTE: Regis D DIRECTORS	tered Agent signature require  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS	ed when reinstating) DATE	AND DIRECTO	0RS IN 12	CD2E034 (41,00)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AN PD BYRNE,ESTHER MORRIS 2838 N.W. 22ND AVE. MIAMI FL	t and title if applicable. (NOTE: Regis D DIRECTORS DELETE	tered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ed when reinstating) DATE	AND DIRECTO	PRS IN 12 ☐ Addition	CD0E034 (44,00)
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6.4 CITY-ST-ZIP CITY-ST-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 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

NAME

STREET ADDRESS