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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 293439

1. Corporation Name				
2401 BUILDING INC			i	
2407 DOILDING INO			r southing trains and a little black that after all all	I BEBRI BIBLI BRÜHL BIBLI BEBLI ABBI
				<b>                                    </b>
Principal Place of Business	Mailing Address			<b>                                    </b>
i '	<u>-</u>		·	
7500 N.W. 72ND AVENUE P.O. BOX 666	7500 N.W. 72ND AVENUE P.O. BOX 666			
MIAMI FL 33166	MIAMI FL 33166	•	DO NOT WRITE IN THI	S SPACE
			3. Date Incorporated or Qualifed	
			05/28/1965	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26 P.O. BOX 66	0666	59-1423327	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired □	\$8.75 Additional
22	27	<u> </u>		Fee Required
City & State	City & State		6. Election Campaign Financing	- <b>\$5.00</b> May Be
23	<del></del>	. 33266-0666	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year to	
24 25	29 33266-0666	30	Personal Property Tax.	☐Yes ☐No
9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	a Agent
KIMMEL,IRVINE		81 Name		
7500 N.W. 72ND AVENUE		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	-
MEDLEY FL 33166				
MEDELT TE 33 100		83		
		84 City		85 Zip Code
			FI	
	J COZ 4500 El-vido Ctobuto.	- Al- about massed come		of changing its registered
11. Pursuant to the provisions of Sections 607.0502	and 607, 1006, Fibrida Statute: Felorida, Such change was att	s, the above-hamed corporation	oration submits this statement for the purpose to in's board of directors. I bereby accept the appo	nintment as registered
<ol> <li>Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation</li> </ol>	i Fiorida. Such change was au	inorizea av the corboratio	oration submits this statement for the purpose on's board of directors. I hereby accept the appoint	ointment as registered
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14. 1 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 copporation 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.

6.4 CITY-ST-ZIP

**SIGNATURE** 

CITY-ST-ZIP