FILE NOW: KILING 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 Jan 29, 1999 8:00am Secretary of State

01-29-1999 90005 015 ***150.00

DOCUMENT #	344497
1. Corporation Name :	00.

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508 NORTH RAINBOW DR. 508 NORTH RAINBOW DR				R.								
HOLLYWOOD FL 33021-6060 HOLLYWOOD FL 33021-606				060								
US US								WRITE IN T	HIS SPACE			
•								3. Date Incorporated or Qua 04/14/1969	lifed			
2. Principal Place of Business 2a. Mailing Address								4. FEI Number			pplied For	
				. Manning Accustoco	- Address			59-1301663	٦		ot Applicable	
21				Suite, Apt. #, etc.							Additional	
22			27	⊢ ¬				5, Certificate of Status Desire	ed 🗀	,	equired .	
City & Stat	tē-			City & State	5 = □ , 4- - =			6. Election Campaign Finan	cing	\$5.00	May Be	
23			28	8			Trust Fund Contribution			to Fees		
Zip	_	Country		Zip	Count	ry		8. This corporation owes the	current year	Intangible		
24		25	29		30			Personal Property Tax.		☐ Yes_	□No	
	9. Name a	and Address of C	Surrent Regis	tered Agent	8	4		10. Name and Address of N	ew Register	ed Agent		
FRIE	EDMAN, KEN	NETH A	repr. 11		ľ	1 Name						
1	0 NE .163RD	.,,,,	**************************************		8	2 Street	Addres	ress (P.O. Box Number is Not Acceptable)				
,	300				8	2			** . ** . ** . **	* # FF		
		EACH FL 3316	2		10	3		King to the		经基础线		
					8	4 City			F	85 Zip	Code	
14 Purcugat	to the provision	one of Sections 60	07 0502 and 6	807 1508 Florida Stat	utes the sho	ve pamed	corpor	ation cultimite this statement fo			registered	
office or i	registered age	nt, or both, in the	State of Flori	da. Such change was	authorized b	y the corp	oration	ation submits this statement fo 's board of directors. I hereby	accept the ap	pointment as re	egistered	
	am tamılıar witi	i and accept the	obligations of		ionda Statute							
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SIGNATURE									DATE		<u> </u>	
l	Signature, typed o	r printed name of registe		if applicable. (NOT	TE: Registered Ag				DATE			
SIGNATURE	Signature, typed o	OFFICER	ered agent and title	if applicable. (NOT	TE: Registered Ag	ent signature i		vhen reinstating)	DATE			
SIGNATURE	Signature, typed o	r printed name of registe	ered agent and title	if applicable. (NOT	TE: Registered Ag	ent signature i		vhen reinstating)	DATE	AND DIRECTO	DRS IN 12	
SIGNATURE 12. TITLE	PD JENKINS,	OFFICER	ered agent and title	if applicable. (NOT	TE: Registered Ag 13. 1.1 TITLE	ent signature i		vhen reinstating)	DATE	AND DIRECTO	DRS IN 12	
SIGNATURE 12. TITLE NAME	PD JENKINS, 508 N. RA HOLLYWO	OFFICER	ered agent and title	if applicable. (NOT	TE: Registered Ag 13. 1.1 TITLE	ent signature i		vhen reinstating)	DATE	AND DIRECTO	DRS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS	PD JENKINS, 508 N. RA HOLLYWO	OFFICER ARTHUR G JR. INBOW DR. OD FL 33021-6	ered agent and title	if applicable. (NOT	TE: Registered Ag 13. 1.1 TITLE 1.2 NAME	ent signature i		vhen reinstating)	DATE	AND DIRECTO	DRS IN 12	
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD JENKINS, 508 N. RA HOLLYWO VD JENKINS, 8561-C SV	OFFICER ARTHUR G JR. INBOW DR. OD FL 33021-6 CHRISTINE M V 90TH ST	ered agent and title	if applicable. (NOTECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature i		vhen reinstating)	DATE	AND DIRECTO	DRS IN 12 Addition	
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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: SIGNATURE AND THEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

125, /+w Jan 11, 1999

954-964-7775 Daytime Phone #