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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90022 031 ***158.75

DOCUMENT # 415085

1. Corporation Name

WOODRINE MORIJE HOME PARK INC

	INE WOODLE HOWE FAIR	- tart t	~ -				
Principal Place	e of Business	Mailing Address			1 iddits Bidds stadt ditt båser serer gitt gigt.		
304 SE 8TH ST	•	304 SE 8TH ST					
HALLANDALE F		HALLANDALE FL 33009		•		00405	
					DO NOT WRITE IN THIS	SPACE	
					 Date Incorporated or Qualified 12/20/1972 		
- Di	In an of Divisional	2a, Mailing Address			4. FEI Number	I An	plied For
~	lace of Business	— ·			59-1512435		t Applicable
0.31. 4-4	41 -4-	Suite, Apt. #, etc.				\$8.75	
Suite, Apt.	#, etc.	27			5. Certifcate of Status Desired	Fee Re	
City & State		City & State		·	6. Election Campaign Financing	\$5.00	May Bo
City & State	6	28			Trust Fund Contribution	Added t	•
Zip	Country	Zip	Cour	try	8. This corporation owes the current year In-	tangible	./
-	25		30	•	Personal Property Tax.	Yes	ŪNo
	g. Name and Address of Curr		- T		10. Name and Address of New Registered	Agent	
				81 Name			
	ILICHTE JR., RAY A.		}	00 04==4 4 1	Iress (P.O. Box Number is Not Acceptable)		
2134 HOLLYWOOD BLVD				B2 Street Add	iress (F.O. Dox Number is Not Acceptable)		
HOL	LYWOOD FL 33020		F	B3			
						- 	
			1	B4 City	FL	85 Zip (Code
SIGNATURE	Signature, typed or printed name of registered a OFFICERS /	gent and title if applicable. (NOTE: F AND DIRECTORS	Registered /	lgent signature requir	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTO	R\$ IN 12
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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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: