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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 458846

1. Corporation Name

RUNWAY 84, INC.

Principal Place of Business	Mailing Address		
330 S.R. 84 FORT LAUDERDALE FLORIDA 33315	9720 PINES BLVD PEMBROKE PINES FL 33024 US		

## **FILED** Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90072 025 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

07/31/1974

2 Principal Pl	ace of Business	2a. Mailing Address		<u> </u>	4. FEI Number	Api	olied For	
z. Fillicipairi	ace of Business	26			59-1583825		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
2		27			· · · · · · · · · · · · · · · · · · ·	<del></del>		
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	- 1	
3	Country	Zip	Country		8. This corporation owes the current ye	ar Intangible		
Zip		29 30			Personal Property Tax.			
4	9. Name and Address of Currer		<del>'</del> !		10. Name and Address of New Regist	ered Agent		
	5. Name and Address of Conten	- Togiotorou - Igoni	81	Name			Ì	
BRUNO, ANTHONY JR				(2.0. For North Associable)				
11860 NW 21 CT			82	82 Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33323			83	83				
			84	City		FL 85 Zip C	Lode	
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the above	-named corpo	eration submits this statement for the purpo	se of changing its	registered	
affina ar r	registered agent, or both, in the State im familiar with, and accept the obliga	of Fiorida, Such change was autr	iorizeu dy i	life Colporation	n's board of directors. I hereby accept the	appointment as re	gistered	
agent. I a	m familiar with, and accept the obliga	mons of, Section 607.0303, Florida	a Olatotos.				•	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	egistered Agent	signature required	when remeasing).	(TE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	PTD	☐ DELETE	1.1 TITLE		And the second s	☐ Change	Addition	
NAME	BRUNO, ANTHONY		1.2 NAME		•			
STREET ADDRESS	***** **** OT		1.3 STREET	ADDRESS	•			
CITY-ST-ZIP	PLANTATION FL		1.4 CITY-ST	-ZIP				
TITLE	SD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition	
NAME	BRUNO, LORI		2.2 NAME	ļ	4			
STREET ADDRESS	A A A A A B A A A A A A A A A A A A A A		2.3 STREET	ADDRESS			Ì	
CITY-ST-ZIP	PLANTATION FL		2, 4 CITY-S	T-ZIP	<u> </u>			
TITLE		. DELETE	3.1 TITLE			☐ Change	☐ Addition	
NAMÉ			3.2 NAME				÷	
STREET ADDRESS			3.3 STREET	ADDRESS			10	
CiTY-ST-ZIP			3.4. CITY-S	T-ZIP		3.2	(133(43 <u>)</u>	
TITLE		☐ DELETE	4.1 TITLE			∵ □ Change	. >: 💽 Addition	
NAME			4, 2 NAME					
STREET ADORESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
NAME .			5.2 NAME					
STREET ADDRESS			5.3 STREET	i				
CITY-ST-ZIP		<u></u>	5.4 CITY-S	T- ZIP		· Chares	Addition	
TITLE		☐ DELETE	6.1 TITLE			☐ Change		
NAME	}		6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY-S					
	certify that the information supplied v	rith this filing does not qualify for the	he exempt	ion stated in S	Section 119.07(3)(i), Florida Statutes. I furth shall have the same legal effect as if made	ner certify that the le under oath; that	iniormation I am an	

officer or director of the corporation or the receiver or trustee empowered to execute this report as required by C Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE/