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

DOCUMENT # 461114

1. Corporation Name

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

04-30-1999 90102 012 ***150.00

POMPADOUR PRODUCTS, INC.									
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	· · · · · · · · · · · · · · · · · · ·))	I Pish 3131 1821
Principal Place of Business Mailing Address									
956 S.W. 12TH AVE.						ļ			
POMPANO BEACH FLORIDA 33069 POMPANO BEACH FLORIDA 3						DO NOT WRITE !	N THIS	SPACE	
						3. Date Incorporated or Qualifed			
						09/05/1974			
Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For
21						11-2115420			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5.*Certifcate of Status Desired] -		Additional
22 27 27 27 27 27 27 27 27 27 27 27 27 2									Required
City & State	e	City & State	ny & State			6. Election Campaign Financing]	•	May Be d to Fees
23 Zin	Country	Zip	Counti			Trust Fund Contribution	voor Into		u to rees
Zip			1			This corporation owes the current Personal Property Tax.	year inta	Yes	□No
24	9. Name and Address of Curre		<u>''</u>			10. Name and Address of New Regi	stered A		
	3, 114110		8	1 1	Name]
Brody, Sherry					34 A A A A	(Address / D.O. Day Niveshor in New Assessments)			
1197 N.W. 83RD AVE.			82 Street Addr			ss (P.O. Box Number is Not Acceptable	,		
COR		8	3				_		
			-		214			Tes 7:	p Code
			8	ŀ	City		FL	'	
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508, Florida Statutes,	the abo	ve-n	amed corpo	ration submits this statement for the purious board of directors. I hereby accept the	pose of	hanging	its registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	→ of Florida. Such change was authorities of, Section 607.0505, Florida	orized b a Statute	y the es.	e corporation	is board of directors, I hereby accept th	e appoin	imeni as	registered
SIGNATURE						•		•	`
SIGNATORE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: Re-	gistered Ag	jønt sig	gnature required v		DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AN	D DIRECT Change	
TITLE	D	☐ DELETE	1.1 TITLE					C Charig	a C vagurou
NAME	BRODY, HAROLD		1.2 NAME						
STREET ADDRESS	750 S.E. 5TH COURT		1.3 STREET						
CITY-ST-ZIP	POMPANO BEACH FL	☐ DELETE	1.4 CITY-ST- 2.1 TITLE		P			Change	e Addition
TITLE	VD PRINCE	bettre	2.1 HILE 2.2 NAME					و	
NAME	BRODY, BRUCE				NDOTTO .				{
STREET ADDRESS	750 S.E. 5TH COURT POMPANO BEACH FL			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			•		· .
CITY-ST-ZIP				3.1 TITLE				Change	e 🔲 Addition
NAME	D Brody, Florence	,						_ •	j
STREET ADDRESS			3.3 STRE		DRESS				Ì
CITY-ST-ZIP	POMPANO BEACH FL			-ST-Z					}
TITLE	PD PD	☐ DELETE	4.1 TITLE		" 			Chang	e Addition
NAME	BRODY, SHERRY		4. 2 NAME						
STREET ADDRESS	1197 N.W. 83RD AVE.		4.3 STREE		DRESS				
CITY-ST-ZIP	CORAL SPRINGS FL	,	4.4 CITY-ST-ZIP		IP				
TITLE .		☐ DELETE	5.1 TITLE					Chang	e Addition
NAME			5.2 NAME						
STREET ADDRESS		i	5.3 STRE	ETAD	DRESS				ļ
CITY-ST-ZIP			5.4 CITY-8		IP		_		
TITLE		☐ DELETE	6.1 TITLE		[,		☐ Chang	e 🔲 Addition
NAME	•	į	6.2 NAME		ļ				l
STREET ADDRESS			6.3 STRE						{
CITY-ST-ZIP			6.4 CITY-	-ST-ZI	IP ·				

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR