03-30-1999 90036 024 \*\*\*150.00

## 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 # 505224 1. Corporation Name							·
obipolatio	DANCE STUDIOS, INC.						
Principal Plac	e of Business	Mailing Address					<u>           </u>
15410 SW 77Ti		% HMPD					
MIAMI FL 33157 16100 NE 16 AVE					DO NOT WRITE IN THIS SPACE		
		NO MIAMI BCH FL 33162 US			3. Date Incorporated or Qualifed		
		••			06/15/1976		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For		Applied For
21		26	<del></del>		00 1070000		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		5 Additional Required
22 City & Stat		City & State			6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution		et to Fees
Ζiρ	Country	Zip	Count	ry	8. This corporation owes the current year Int		
24	25	29 30	)		Personal Property Tax.	Yes	□No
	9. Name and Address of Curren	t Registered Agent		al Name	10. Name and Address of New Registered	Agent	
THE	ISS, GEORGE B.		8	1 Name			
15410 SW 77TH AVE.			8	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
	MI FL 33157		8	3			
			L				
			8	4 City	FL	_  85  Zi	ip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the abo	ve-named corp	poration submits this statement for the purpose of	changing	its registered
office or r agent. I a	registered agent, or both, in the State of the familiar with and accept the familiar with and accept the familiar with t	of Floridat Such change was auth inns of /Section 607.0505, Florida	orized b a Statute	y the corporati	ion's board of directors. I hereby accept the appoint	ntment as	registered
SIGNATURE	ままして つくり	Marie !			The same of the sa	到這	
	Signature, 1 ed or prints tame of registered agen			jent signature require		VID DIDEO	TODG (N. 12
12.	PSD / OFFICERS AN	D DIRECTORS	13.	. 1	ADDITIONS/CHANGES TO OFFICERS AF	Chang	
TITLE	THEISS, GEORGE B.	_					,
NAME STREET ADDRESS	46440 0 102 33711 416	· ·		ET ADDRESS			İ
CITY-ST-ZIP	A 11 A A 11 A 11		1.4 CITY				
TITLE	V	/ □ DELETE 2.1T			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Chang	ge Addition
NAME	THEISS, LEONARD J.		2.2 NAMI	<b>■</b>			
STREET ADDRESS	140 4101100405 00		2.3 STRE	ET ADDRESS			•
CITY-ST-ZIP	NORTH PALM BCH FL		2. 4 CITY	-ST-ZIP			
TITLE	T	DELETE	,3.1 TITLE		المسلم من المالي المستعملية والمستم	[_] Chang	ge Addition
NAME	THEISS, ALICE W.		3.2 NAMI	l			
STREET ADDRESS				ET ADDRESS	•		
CITY-ST-ZIP	NORTH PALM BCH FL	DELETE	3.4. CITY 4.1 TITLE		<del></del>	Chang	ge Addition
TITLE NAME	THEISS, GEORGIA H.	O Decerte	4. 2 NAM				,-
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	MIAMI FL		4.4 CITY	i			
TITLE		☐ DELETE	5.1 TITLE			☐ Chang	ge Addition
NAME			5.2 NAMI	E	•		
STREET ADDRESS				ET ADDRESS	•		
CITY-ST-ZIP			5.4 CITY				
TITLE		☐ DELETE	6.1 TITLE			Chang	ge Addition
NAME			6.2 NAMI				į
STREET ADDRESS	l .		0.3 STRE	ET ADDRESS			

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP