Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90106 041 \*\*\*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 # 543739

1. Corporation Name

RESPITR	IACE CORPORATION					
Principal Place	of Business	Mailing Address			Oldii didii didii didii əsə	KI UIUIL IUBI
1840 WEST AVE		1840 WEST AVE.				
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139			DO NOT WRITE IN THIS SPACE			
					THIS SPACE	1
				3. Date Incorporated or Qualifed 08/24/1977	•	
2 2 1		2a. Mailing Address		4. FEI Number	Appli	lied For
	ace of Business	— ĭ		13-2955907	<u> </u>	Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Ad	• •
22	<i>m</i> , etc.	27		5. Certifcate of Status Desired	Fee Requ	uired
City & State		City & State		6. Election Campaign Financing	\$5.00 M	1ay Be
23		28		Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	8. This corporation owes the current ye		
24	25	29	30	Personal Property Tax.	<del></del> :	□No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Regist	tered Agent	-
	COCKETOE MALL CORRODATIO	ON OVOTEN INO	81 Name	•	•	İ
	PRENTICE-HALL CORPORATION	JN STSTEM, INC.	82 Street Add	dress (P.O. Box Number is Not Acceptable)		
	HAYS STREET					
IALL	AHASSEE FL 32301		83	•	٠.,	}
			84 City		85 Zip Co	ode
				_	FL 183 ZIP	}
}		TOD and COT 4500 Florida Chatuta		-poration submits this statement for the purpo		enistered
office or re agent, I ar	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	le of Florida. Such change was auf	thorized by the corporal	rporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its re	egistered istered
office or re agent. I ar	naistored eacet or both in the Stat	le of Florida. Such change was aut gations of, Section 607.0505, Flori	thorized by the corporal	atron's board of directors. Thereby accept the	ose of changing its re appointment as regi	
office or re agent. I ar	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered as	te of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable.  (NOTE: FAND DIRECTORS	thorized by the corporal da Statutes.  Registered Agent signature requi	agion's board of directors. I neleby accept the	use of changing its re appointment as reginate.	RS IN 12
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office or reagent. I an agent. I an SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE	egistered agent, or both, in the Stat m familiar with, and accept the oblig  Signature, typed or printed name of registered as  OFFICERS A  PTD  SACKNER, MARVIN A  300 WEST RIVO ALTO AVE	te of Florida. Such change was aut gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: FAND DIRECTORS	thonzed by the corporal da Statutes.  Registered Agent signature required as 1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE	atron's board of directors. Thereby accept the	ose of changing its reappointment as reginated as reginat	RS IN 12
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CITY-ST-ZIP 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS