## 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 # 546404

NESS AND NUNBERG, C.P.A., P.A.

Principal Place of Business		Mailing Address			
20900 W DIXIE HWY		20900 W DIXIE HWY			
STE A		STE A			TO MOT WIRITE IN THIS CRACE
NORTH MIAMI B	BEACH FL 33180	NORTH MIAMI BEACH FL 3318	30		DO NOT WRITE IN THIS SPACE
US -		US			3. Date Incorporated or Qualifed
	<u> </u>				08/09/1977
Principal Place of Business 2a. Mailing Addre					4. FEI Number Applied For
21		26			<b>59-1756809</b> Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Sa.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State	<del>-</del>	City & State	City & State		6. Election Campaign Financing S5.00 May Be
23		28	•		Trust Fund Contribution Added to Fees
20		<del></del>	Zip. Country		8. This corporation owes the current year Intangible
	29 30		ה	-	Personal Property Tax.
24	9. Name and Address of Current	_ <del></del>	<u>'L</u>		10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	8	Name	
NESS, GERALD J.			-	'	
	O W DIXIE HWY	82 Stree		Street	Address (P.O. Box Number is Not Acceptable)
STE			83		
NOR	TH MIAMI BEACH FL 33180		84	City	85 Zip Code
			0.	City	FL   o
44 Pursuant I	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes,	the abo	/e-named	d corporation submits this statement for the purpose of changing its registered
office or re	edistered agent or both in the State C	of Florida. Such change was auut	Onzeu D	V line corp	poration's board of directors. I hereby accept the appointment as registered
agent. I ar	n familiar with, and accept the obligat	ions of, Section 607.0505, Florida	a Statute	S.	
SIGNATURE		AIDTE D	-:		required when reinstating) DATE
				ant signature r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		DELETE	13.		ABBITIONS/CHANGES TO OF TICERO AND BIRECTORIO IN TELE
TITLE	PSD AMERICAN CERTAIN				
NAME ~	NESS, GERALD J.	** •	1.2 NAME		
STREET ADDRESS			1.3 STRE	ET ADORESS	
CITY-ST-ZIP			1.4 CITY-	ST-ZIP	
TITLE	T	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	NUNBERG, VICTOR L		2.2 NAME	:	
STREET ADDRESS			2.3 STRE	ET ADDRESS	
[	NORTH MIAMI BEACH FL 33180		2. 4 CITY	ST. 7ID	
CITY-ST-ZIP TITLE			3.1 TITLE		☐ Change ☐ Addition
1 1			3.2 NAME		
NAME					
STREET ADDRESS				ET ADDRESS	· · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP			3.4. CITY		☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE		
NAME	<del>-</del>	†	4. 2 NAM	<b></b>	
STREET ADDRESS			4.3 STRE	ET ADDRESS	6
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE			5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	:	
STREET ADDRESS			5.3 STRE	ET ADDRESS	
l <sup>-</sup>			5.4 CITY-		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE			6.2 NAME		
NAME					
STREET ADDRESS			6.3 STRE	ET ADDRESS	5

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

CITY-ST-ZIP

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90003 030 \*\*\*150.00