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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 546772

1. Corporation Name

JUST A TRIM, INC.

JUST A TRIM, INC.

FILED Feb 08, 1999 8:00am Secretary of State

02-08-1999 90043 019 ***150.00



Mailing Address Principal Place of Business 18240 W DIXIE HWY 18240 W DIXIE HWY NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/22/1977 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-1769056 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. : 🗆 🔒 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Zip Country Zip 8. This corporation owes the current year Intangible Personal Property Tax. 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 REICHENBAUM, MARK Street Address (P.O. Box Number is Not Acceptable) 18240 W DIXIE HWY NORTH MIAMI BEACH FL 33160 83 85 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of flice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TITLE ППЕ 176/35 13 REICHENBAUM, MARK 1.2 NAME NAME 18240 W DIXIE HWY 1.3 STREET ADDRESS STREET ADDRESS N. MIAMI BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP [7] Change Addition ☐ DELETE 2.1 TITLE TITLE 2.2 NAME REICHENBAUM, CANDACE NAME 18240 W DIXIE HWY 2.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI BEACH FL 1984 2.4 CITY-ST-ZIP CITY-ST-ZIP [] Addition ☐ DELETE 31 TITLE ☐ Change HERBURL DISC 3.2 NAME 医格切征 研究 3.3 STREET ADDRESS STREET ADDRESS 外域観測のほうのは CITY-ST-ZIP 3.4. CITY-ST-ZIP □ DELETE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 6.1 TITLE TITLE

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 order attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE

NAME

STREET ADDRESS

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MRE MAZIOIRTERLUEPBUUM

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305-933-337

Daytime Phone

CR2E034 (11/98)