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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 18, 1999 8:00am

**Secretary of State** 

02-18-1999 90014 020 \*\*\*150.00

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 558884 1. Corporation Name

AIM MANAGEMENT SERVICES, INC.

Principal Plac	ce of Business	Mailing Address			1 198101 63101 01191 19101 19111 0181 01811 0		BABUA BUBUI ABBU
3231 SW 44 S		3231 SW 44 ST.				•	
FT. LAUDERDALE FL 33312 US  FT. LAUDERDALE FL 33312 US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					02/06/1978		
2. Principal F	Place of Business .	2a. Mailing Address			4. FEI Number	Ap	plied For
21 26				59-1779295	No	t Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
22 27				S. Soldied S. States Session	Fee Re	equired	
City & State City & State				6. Election Campaign Financing		May Be	
23 28 28		C		Trust Fund Contribution	Added 1	to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Into	<u> </u>	
24	9. Name and Address of Curre		30		Personal Property Tax.		□No
	3. Name and Address Of Curren	it registered Agent	81	Name	10. Name and Address of New Registered	Agent	
	NGLER, CRAIG 1°SW 44 ST		82	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
	LAUDERDALE FL 33312		83	· ··	The management of the property of the first terms of	in a part of the second	100 5 5 5 6 6 0 100 5 5 6 6 6 0
			84	City	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	6 (1) (1) (1)	
e, A			04	City	FL.	/ 85 Zip (	Lode
11. Pursuant office or i	registered agent, or both, in the State	J2 and 607.1508, Florida Statutes of Florida. Such change was aut	s, the above horized by	e-named co	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appoin	changing its ntment as re	registered aistered
" agent. I a SIGNATURE	ım familiar with, and accept the obliga	ations of, Section 607.0505, Floric	da Statutes.				
agent. I a	am familiar with, and accept the obligations and accept the obligations are strong and strength and accept the obligations are strong and accept the obligations are strong as a strong and accept the obligations are strong as a strong accept the obligations are strong acceptance and acceptance acceptance acceptance and acceptance acce	nt and title if applicable. (NOTE: R	da Statutes.		ired when reinstating).	D DIDEOTO	
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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

CITY-ST-ZIP

ORAIG B SPETICLEX