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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90051 029 ***150.00

DOCUMENT	#	564706
1. Corporation Name		00 11 00

POLBRO	INTERNATIONAL, INC.	•				
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Principal Place	e of Business	Mailing Address			86)18 83)1 81911 81911 #1811 B18	EL 44011 01011 1001
1815 GRIFFIN F	and the second s	1815 GRIFFIN RD				
#203		#203	·		,	
DANIA FL 3300	4	DANIA FL 33004			RITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualife	ed	
				12/22/1977	<u> </u>	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	<u> </u>	Applied For
21	·	26		59-1870538		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
22		27				Required
City & State	е	City & State		6. Election Campaign Financin		May Be
23		28		Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip	Country	8. This corporation owes the co		Пы-
24	25	120	30	Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of Nev	v Registered Agent	
POLI	LACK, CHARLES		oi Name			
) S. OCEAN DR12-Q		82 Street Add	dress (P.O. Box Number is Not Acce	ptable)	
1960) 5. OCEAN DR12-0				Lington, Arman Butt Butter of	nundinne graes Viete in North
LIAL	LANDALE EL 22000	•	83	1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
HALI	LANDALE FL 33009		84 City		85 7	p Code
,		in the second second	1 1 1		FL "	-
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the	he purpose of changing	its registered registered
office or n	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au tions of Section 607.0505, Flori	tnorized by the corporati da Statutes.	tion's board of directors. I hereby acc	Sept the appointment do	regiotorea
」 agent. I a	egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was au tions of, Section 607.0505, Flori	thorized by the corporali da Statutes.	tion's board of directors. I hereby acc	ospi i lo appointment ao	rogiotorou
office or n agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of the state	tions of, Section 607.0505, Flori	thorized by the corporation of the statutes. Registered Agent signature requires	red when reinstating)	DATE	··
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agent. La SIGNATURE	m familiar with, and accept the obligation of the state o	nt and title if applicable. (NOTE:	da Statules. Registered Agent signature require	red when reinstating)	DATE	TORS IN 12
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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.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Date