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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 603039

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90039 008 ***150.00

Principal Place	e of Business	Mailing Address						
4100 PROFESSI	IONAL BLDG STE A	4100 PROFESSIONAL BLDG	STE A					
4100 SOUTH DIXIE 4100 SOUTH DIXIE			•					
WEST PALM BEACH FL 33405 WEST PALM BEACH FL 3340			105		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 08/23/1971			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Ap	plied For	3
21		26			59-1361762		t Applicable	7.
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	. \$8.75 A Fee Re	I	
City & State	ie	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added t	• • •	
Zip	Country	Zip	Count	гу	8. This corporation owes the current year	Intangible		
24	25	29	30		Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Register	ed Agent		
500	OF MADI		8	1 Name		•		
	SE,KARL J		8	2 Street Add	Iress (P.O. Box Number is Not Acceptable)			
	S. DIXIE, SUITE A	•			The second secon	A STATE OF THE STA		
WES	ST PALM BEACH FL 33405		8	3	これを設置が最終な			
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			thorizad:h	v the comorat				
agent. I a	m familiar with and accept the obligati	ions of, Section 607.0505, Flori	thorizad:h	y the corporations.	ion s board of directors, trinsledy accept the ap	1-4	136	č.,
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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: