## - 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

## FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90010 010 \*\*\*150.00

1. Corporation	MENT # 626890 POT NO. 44 INCORPORAT						
Principal P ace of Business Mailing Address					. I IDDVIT DEN OVER GREAT IDNIO SENT ORM ONE	1 #18() DIBN B(8()	Di Bil Bidil IBBI
7901 LUDLAM RD							
OU MIAMI FL S	33143	30 MINIMI 12 00140			DO NOT WRITE IN TH	S SPACE	
					3. Date Incorporated or Qualifed 06/11/1979		
2. Principal Place of Business		2a. Mailing Address	-		4. FEI Number	A	pr lied For
21		26		59-1914744		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	•	A aditional equired	
22		City & State					
City & State		<b>⊢</b> '		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		, ,	
Zip Zip	Cour try	Zip	p Country		This corporation owes the current year		
24	25	29 3	¬		Persor al Property Tax.	Yes	1 <u>2</u> 140
	9. Name and Address of Curre				10. Name and Address of New Registers	d Agent	
			81	Name			
BRUCE WILNER			82	Street Addr	ress (P.O. Bo) Number is Not Acceptable)		
7901 LUDLAM RD							
SO	MIAMI FL 33143		83				
			84	City		. 85 Zip	Code
				_	oration submits this statement for the purpose		
agent. I ai	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	da Statutes		on's board of (lirectors. I hereby accept the applied when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS		
TITLE	D OFFICERS A	N() DIRECTORS	1,1 TITLE		ADDITIONS/GRANGES TO GOVERN	Change	
NAME	HARRIS,LARRY J	_ occes	1.2 NAME				_
STREET ADDRESS	7901 LUDLAM RD		1.3 STREET ADDRESS				
CITY-ST-ZIP	SO MIAMI FL 33143		14 CITY-ST-ZIP				
TITLE	V	☐ DELETE	2.1 TITLE			Change	Addition
NAME	DEUTSCH, ELLIOT J		2.2 NAME				
STREET ADDRESS	7901 LUDLAM RD		2.3 STREET ADDRESS				
CITY-ST-ZIP	SO MIAMI FL 33143		2. 4 CITY-ST-ZIP				
TITLE	EXVP	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	WILNER, BRUCE S.		32 NAME				
STREET ADDRESS	7901 LUDLAM RD		3 3 STREET ADDRESS				
CITY-ST-ZIP	SO MIAMI FL 33143	The man	3.4. CITY- ST-ZIP			[ Change	Addition
TITLE		☐ DELETE	4.1 TITLE				
NAME			. 4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		_	
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME	Λ		6.2 NAME				
STREET ADDRESS	$\sim$ $\parallel$		6.3 STREE	TADDRESS			
CITY-ST-ZIP		\	6.4 CITY-S	T-ZIP			

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 supplied annual report is true and accurate and that my signature shall have the same legal effect as if made or derivation of the corporation of the topperation of the corporation of the topperation of t

SIGNATURE:

NATURE AND TYPES OF WHITED NAME OF SIGNING OFFICE TOR DIRECTOR

1/23 /98 (305) 666- 0642

Date

Daytime Phone #