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

DOCUMENT # 684018

DUNE LINE COMPANY.

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					•				
Principal Plac	ce of Business	Mailing Add	lress .			1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1			
C/O SIDNEY C. SHAPIRO. C.P.A. C/O SIDNEY C. SHAPIRO.			C. SHAPIRO. C.I	P.A.			•	1,5	i
1412 INDIAN ROAD 1412 INDIAN ROAD									
W. PALM BEACH FL 33406 W. PALM BEACH FL 33406			ACH FL 33406				NOT WRITE IN TH	1IS SPACE	
						3. Date Incorporated	or Qualified	. •	,
•						08/14/1980			
2. Principal F	Place of Business	2a. Mailing	Address			4. FEI Number			olied For
21	· · · · · · · · · · · · · · · · · · ·	26			•	59-2052767			Applicable
Suite, Apt.	. #, etc.	Suite, A	pt. #, etc.			5. Certifcate of Status	Desired	\$8.75 A	
22		27 -		•		ļ · · · · · · · · · · · · · · · · · · ·		Fee Rec	·
City & State		City & State			6. Election Campaign	- 11	\$5.00		
23		28				Trust Fund Contrib		Added to	Fees
Zip	Country	Zip		Country	,	8. This corporation ov	•		
24	25	29	30	<u> </u>		Personal Property			□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
SIUI	NEY C SHAPIRO, CPA	-		81	Name				
1412 INDIAN ROAD				82	Street Add	ress (P.O. Box Number is I	Not Acceptable)	****	
W. PALM BEACH FL 33406						. 75 224 4 .	CHARACTER ACTIONS		2 / / / / / / /
VV. 1	PALM BEAUTI FL 33400			83					
				84	City	1. 30 d 2 d 3 d 4 d 4		85 Zip C	ode
A to remote a	San				•		F	-L -	
11., Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508,	Florida Statutes,	the above	e-named corp	poration submits this staten	nent for the purpose	of changing its	registered
oπice or ₩ agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligation	r Florida. Such i ons of, Section i	cnange was auth 607.0505, Florida	onzed by a Statutes	tne corporat	ion's board of directors. I fil	stepy accept tite ap	pointment as reg	listered
SIGNATURE						•	,		
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Re	gistered Ager	nt signature require	ed when reinstating)	DATE		
12.	OFFICERS AND			13.		ADDITIONS/CHANG	ES TO OFFICERS		
TITLE	PD		☐ DELETE	1.1 TITLE				☐ Change	Addition
NAME	LONDONO, FERNANDO			1.2 NAME					
STREET ADDRESS	3000 N OCEAN DR, 33E			1.3 STREET	TADDRESS				
CITY-ST-ZIP	SINGER ISLAND, FL 00000			1.4 CITY-S	T-ZIP				
TITLE	SD		☐ DELETE	2.1 TITLE				Change	Addition
NAME .	CAMARGO-LONDONO, MARIA		•	2.2 NAME		•			
STREET ADDRESS				2.3 STREET	T ADDRESS	,			
CITY-ST-ZIP	SINGER ISLAND, FL 00000			2. 4 CITY-S					
TITLE	1. 1. 1. 14x 1 -1		☐ DELETE	3.1 TITLE	71-211			Change	Addition
NAME	数さを体験してい	•		3.2 NAME				, :	
STREET ADDRESS	PROME TOACE			3.3 STREET	T ADDDESS				
J\$. *	REPORT OF S						多的特别 医神经	此語說讀者	M: \$40 (53)
CITY-ST-ZIP				3.4. CITY-S	11-ZIP	11374	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 7 3 7 5 7 5	
TITLE			∏ DELETE !	44 TIBE		3 3 3 3 3		i i (Chande C	Addition
NAME OF			☐ DELETÉ	4.1 TITLE		4 - 4 - 4	7 1973 PM PM (3	ि ै∄ ☐ Change दे	Addition
NAME CONC.	e september		□ DELETÉ	4. 2 NAME		A STATE OF THE STA	ar mag dagaga	? च्या_ Change ऽ	Addition
STREET ADDRESS	F 1		□ DELETÉ	4. 2 NAME 4.3 STREET		त्र स्थापना क्षेत्र स्थापना क्षेत्र स्थापना क्षेत्र स्थापना क्षेत्र स्थापना क्षेत्र स्थापना क्षेत्र स्थापना क स्थापना स्थापना स्थापन	ar i tra a mangali	रे ्य ्रा Change इ	Addition
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STREET ADDRESS CITY-ST-ZIP	F 1		□ DELETÉ □ DELETE	4. 2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE			3 743 A 144 A	Change	Addition
STREET ADDRESS	F 1		· i	4. 2 NAME 4.3 STREET 4.4 CITY-S	T-ZIP	(1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	2 12 3 43 43 11 11 11 11 11 11 11 11 11 11 11 11 11	!	

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

SED RUMESTO RECOR

髓的图 树木配、生产原位

CITY-ST-ZIP

STREET ADDRESS

C/TY-ST-ZIP

TITLE

NAME

□ DELETE

☐ Change

FILED

Jan 30, 1999 8:00am

Secretary of State

01-30-1999 90009 005 ***150.00

■ Addition