

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
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90171 014 ***150.00

DOCUMENT # 810282

1. Corporation Name
1200 HILLSBORO INC

Principal Place of Business
1200 HILLSBORO MILE
HILLSBORO BCH FL 33062
US

Mailing Address
1200 HILLSBORO MILE
HILLSBORO BCH FL 33062
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/28/1955

4. FEI Number

59-0761988

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROOKER, V. M
APT 6
1200 HILLSBORO MILE
HILLSBORO BEACH FL 33062

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME KOLB, BARBARA
STREET ADDRESS 1200 HILLSBORO MILE A1A
CITY-ST-ZIP HILLSBORO BEACH FL 33062

TITLE ☒ DELETE
NAME POTTS, BEVERLY A
STREET ADDRESS 1200 HILLSBORO MI APT 5
CITY-ST-ZIP HILLSBORO BEACH FL 33062

TITLE ☒ DELETE
NAME COLOMBES, JERRY
STREET ADDRESS 1200 HILLSBORO MILE
CITY-ST-ZIP HILLSBORO BEACH FL

TITLE ☒ DELETE
NAME KRUSE, DIETER
STREET ADDRESS 1200 HILLSBORO MILE APT 1
CITY-ST-ZIP POMPANO BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P T
1.2 NAME Jack Lewis
1.3 STREET ADDRESS 1200 Hillsboro Mile A1A
1.4 CITY-ST-ZIP Hillsboro Beach FL 33062 ☒ Change ☐ Addition

2.1 TITLE *JERRY COLOMBES*
2.2 NAME *1200 HILLSBORO MILE*
2.3 STREET ADDRESS *HILLSBORO BEACH FL 33062*
2.4 CITY-ST-ZIP ☒ Change ☐ Addition

3.1 TITLE VP
3.2 NAME Carl Miller
3.3 STREET ADDRESS 1200 Hillsboro Mile A1A
3.4 CITY-ST-ZIP Hillsboro Beach FL 33062 ☒ Change ☐ Addition

4.1 TITLE *SECRETARY*
4.2 NAME *MARCIA JONES*
4.3 STREET ADDRESS *1200 HILLSBORO MILE*
4.4 CITY-ST-ZIP *HILLSBORO BEACH FL 33062*
JP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME Baerbel Frenz
5.3 STREET ADDRESS 1200 Hillsbor Mile A1A
5.4 CITY-ST-ZIP Hillsboro Beach FL 33062 ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] MAR 12, 1999 954-426 -0040

Date

Daytime Phone #

CR2E034 (11/98)