PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	E20273
DOCOMENT	"	FZ33/3

FILED Mar 08, 1999 8:00 am Secretary of State 03-08-1999 90004 007 ***150.00

DOCU	MENT # F29373				-			
1. Corporation	Y, WARD, STUCKEY OF FLO	RIDA INC.						
DLANELT	, WAND, GIUCKET OF FLO	180A 810.			1 163 (163 (164 (164 (164 (164 (164 (164 (164 (164	1 6 11 8 1811 313 11 313 11 1	RADIA BUBU KADA	
Principal Place	of Business	Mailing Address			9 2007-100 tite troin sucan nerte zamun tite a	1914 dollta Athii digit;	ris() 31811 (86)	
2641 EAST ATL		2641 EAST ATLANTIC BLVD	STE 201					
POMPANO BCH		POMPANO BCH FL 33062			DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporated or Qualifed	1110 01 1102		
					04/13/1981			
2 Dringing D	ace of Business	2a. Mailing Address			4. FEI Number	Ac	plied For	
21	ace of Dusiness	26			59-2110651	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75		
22		27			5. Certificate of Status Desired	Fee Re	quired	
City & State	9	City & State			6. Election Campaign Financing		May Be	
23		28			Trust Fund Contribution		to Fees	
Zip Zip	Country	zıp	—Country⊷		 8 This corporation owes the сителт уез Personal Property Tax. 	ar⊪nmangibae ∐Yes	□No	
24	9. Name and Address of Current	29 3	<u>0 </u>		10. Name and Address of New Regists			
	9. Name and Address of Current	Kegisteleo Agent	81 Name	M	ABY A TATUA	1		
	(ELY, THOMAS E.			///	ss (P.O. Box Number is Not Acceptable)	<u>\</u>	 -	
2641	EAST ATLANTIC BLVD STE	201	82 Street	27	TINE STE	<u>ح</u> ح		
POM	PANO BCH FL 33062		83	<u></u>				- .
			84 City			85 Zip	Code	
			**/F	T,		FL * 多	5308	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above named	corpor	ration submits this statement for the purpor	se of changing its appointment as re	registered gistered	
office or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505. Florid	la Statutes.	J. C. I.O.	ation submits this statement for the purpor's board of directors. I hereby accept the a	aulan	1	
SIGNATURE	11/2/1/2	aller	_			29199_		_
[Signature, typed or printed name of registered agent OFFICERS AND		egistered Agent signature f	adrased /	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	DRS IN 12	CR2E034 (11/98)
12.	CD OFFICERS AND	DELETE	1.1 TITLE			Change	☐ Addition	11
NAME	BLAKELY, THOMAS E	/ \(\)	1.2 NAME				Į	8
STREET ADDRESS	2641 E. ATLANTIC BLVD SUITE	201	1.3 STREET ADDRESS				i	Ü,
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP					82
TITLE	DP	☐ DELETE	21 MLE ,	5		Change	Addition	O
NAME	BLAKELY, THOMAS A		22 NAME		•		j	
STREET ADDRESS	2641 E. ATLANTIC BLVD STE 20)1	2.3 STREET ADDRESS		-			
CITY-ST-ZIP	POMPANO BEACH FL		2.4 City-St-ZIP		The state of the s	Change	Addition	
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NAME			3.2 NAME	m	ARK CATELS	~		
STREET ADDRESS				2	T. LAUDER DALE, F.	L 333	OS	
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		1. LITA DER DARE, 1	Change	Addition	
TITLE		Clocoric	4.2 NAME					 -
NAME			4.3 STREET ADDRESS					
STREET ADDRESS			4.4 CITY-ST-ZIP	l				
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition	
NAME		_	5.2 NAME			•	{	
STREET ADDRESS			5.3 STREET ADDRESS				j	
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAME				}	
STREET ADDRESS			6.3 STREET ADDRESS				!	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		-N 440 07/01/21 Pt. 24- Chapter 14 - 44	a analife, then the	information	
14. I hereby o	certify that the information supplied with	n this filing does not qualify for t	ne exemption stated) IN 56	ction 119.07(3)(i), Florida Statutes. I furthe	ceruly unature	1.00000	

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 line empowered.

SIGNATURE: