03-05-1999 90003 043 ***150.00

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

 Corporation 	THE THE STATE OF T	<i>(</i>						
Principal Place of Business Mailing Address							i diëli ajait alali at	811 61611 168 1
5108 N.W. 10TH TERRACE 5108 N.W. 10TH TERRACE FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309								
FI LAUDERDAL	E FL 33309	FI LAUDENDALE FL	3303			DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualifed 12/22/1981		
Principal Place of Business 2a. Mailing Address						4. FEI Number	Apı	olied For
21		26				59-2167534	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired	\$8.75 A	dditional quired -
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added to	
Zip	Country	Zip	C	ountry		8. This corporation owes the current year		
24	25	29	30			Personal Property Tax.		□No
	9. Name and Address of Curr	ent Registered Agent		۱.,		10. Name and Address of New Registere	d Agent	
\A/LIIT	TEIELD OTEDUEN			81	Name			
WHITFIELD, STEPHEN 5108 NW 10TH TERR.				82	Street Add	dress (P.O. Box Number is Not Acceptable)	.,	
FI. L	AUDERDALE FL 33309			83		,		İ
				84	City		85 Zip C	Code
office or r	to the provisions of Sections 607.01 egistered agent, or both, in the Stat m familiar with, and accept the obligations of the obligations of the section o	te of Florida. Such change v gations of, Section 607.0509	vas authorizi 5, Florida Sta	ed by atutes	the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the appropriate the property of the purpose when reinstating) DATE	or changing its pointment as reg	registered pistered
12.		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD 1E	☐ DELE	E 1.1	ΠTLE	T		Change	Addition
NAME	WHITE LD STEVE		1.2	NAME				
STREET ADDRESS	5108 NW 10TH TERR		1.3	STREET	TADDRESS			
CITY-ST-ZIP	FT. LAUD FL			CITY-S	T-ZIP			
TITLE	VS DELETE			2.1 TITLE			Change	☐ Addition
NAME	WHITFIELD, NEIL		2.2	NAME				
STREET ADDRESS	5108 NW 10TH TERRACE		2.3	STREE	TADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 00000			2.4 CITY-ST-ZIP				
TITLE		☐ D€LE	TE 3.1	TITLE			Change	☐ Addition
NAME			3.2	NAME				
STREET ADDRESS			. 3.3	STREET	TADDRESS			
CITY-ST-ZIP				CITY-S	ST-ZIP		C Charact	☐ Addition
TITLE		☐ DELE		TITLE			☐ Change	☐ Addition
NAME				NAME				
STREET ADDRESS					TADDRESS			
CITY-ST-ZIP				CITY-S	T-ZIP		Change	Addition
TITLE .		☐ DELE		TITLE NAME		•		□ Moniton
NAME	! 				T ADDRESS			
STREET ADDRESS			5.3	SINCE	, ADDINESS			
			5.4	CITY-S	T-7IP			
CITY-ST-ZIP TITLE		☐ DELE		CITY-S	T-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:

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

NTED NAME OF SIGNING OFFICER OR DIRECTOR