## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## **Katherine Harris**

**DOCUMENT #** 

1. Corporation Name

Malcolm, Inc.

Principal Place of Business

2. Principal Place of Business

Mailing Address

2a. Mailing Address

2050 Sweetgay Way Hollywood, FL 33019

## May 05, 1999 8:00 am Secretary of State

05-05-1999 90149 010 \*\*\*150.00

9 3 1 9 493197 - 90149 - 10

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

3/1/82 4. FEI Number 59-2165213

· .		26				59-2165213		No	t Applicable
Suite, Apt. #, etc.			Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A Fee Re	
City & State		City &	State			Election Campaign Financing Trust Fund Contribution		<b>\$5.00</b> Added t	,
Zip	Country 25	Zip-	_ `			This corporation owes the current Personal Property Tax.	•	ngible , ☐ Yes	<b>X</b> No
i	9. Name and Address of Curre					10. Name and Address of New Re	gistered A	gent	
****			·	81	Name				
<i>*</i>					Street Addre	ess (P.O. Box Number is Not Acceptable	le)		
EMO Corporate Services, Inc.									
100 Northeast Third Avenue, Suite 1100								1	
Fort	Lauderdale, FL 33	301		84	City		F١	85 Zip (	Code
agent. I am	of samiliar with, and accept the oblig	ations of, Section	n 607.0505, Florida	Statutes		on's board of directors. I hereby accept	DATE		
12.	OFFICERS A	ND DIRECTOR	3	13.		ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	D/S/T		☐ DELETE	1.1 TITLE				Change	Addition
IAME	Richard L. Malcol			1.2 NAME					
TREET ADDRESS	-2050 Sweet. €ay Way	7	•	1.3 STREE	TADDRESS				
CITY-ST-ZIP	Hollywood, Florid	la 33019		1.4 CITY- 9	ST-ZIP	E			
TITLE	D/ P		☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	James A. Malcolm	II		2.2 NAME					
STREET ADDRESS	2050 Sweet fay Way			2.3 STREE	TADDRESS				
CITY-ST-ZIP	Hollywood, FL 330			2. 4 CITY-	ST-ZIP				The state in
TITLE	D		☐ DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME	Amanda Malcolm		-	3.2 NAME				_	
STREET ADDRESS	2050 Sweet <b>f</b> ay Way			33 STREE	ET ADDRESS				
CITY-ST-ZIP	Hollywood, FL 330	)19		3.4. CITY-	ST-ZIP			[] Chee==	☐ Additio
TITLE			☐ DELETE	4.1 TITLE				Change	[_] Audibor
NAME				4. 2 NAME					•
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP			- In an exe	4.4 CITY-	ST-ZIP			Change	[ ] Addition
TITLE			DELETE	5.1 TITLE				□ cliailge	L'I MORROI
NAME	· · · · · · · · · · · · · · · · · · ·			5.2 NAME	T ADODESS				
*******				5.3 STREE	ET ADDRESS				

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. CITY-ST-ZIP

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

MAlcola

☐ DELETE

Change

-[] Addition

Applied For