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 # F80410

DEBARROS ASSOCIATES, INC.

Principal Place of Business Mailing Address									
601 NE 3RD STREET 601 NE 3RD STREET									
PO BOX 65		PO BOX 65							
DANIA FL 33004 DANIA FL 33004			4				DO NOT WRITE IN THIS SPACE		
	•						3. Date Incorporated or Qualifed		
La No. W. Addition							05/05/1982 4. FEI Number • Applied For		
<u> </u>			Mailing Address				4. FEI Number - Applied For 59-2205778 Not Applicable		
21	#		Suite, Apt. #, etc.				\$8.75 Additional		
Suite, Apt.	#, etc.	<u> </u>	<u> </u>				5. Certificate of Status Desired Fee Required		
City & Stat	е		City & State				& Flection Campaign Financing \$5.00 May Re		
23	-	⊢	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip					8. This corporation owes the current year Intangible		
24	25			30	¬ '		Personal Property Tax.		
	9. Name and Address of Curr			-			10. Name and Address of New Registered Agent		
					81	Name			
DEBARROS, GEORGE A.					82	Ctroot A	+ Address (D.O. Day Number is Not Acceptable)		
	JACKSON ST				02	Suger	et Address (P.O. Box Number is Not Acceptable)		
HOL	LYWOOD FL 33020				83				
		•							
				i	84	City FL 85 Zip Code			
office or t	egistered agent, or both, in the Statem familiar with, and accept the oblining signature, typed or printed name of registered a	te of Florida. Such cha gations of, Section 607	inge was au 7.0505, Flori	ithorized ida Stati	l by t ⊔tes.	the corpo	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered		
12.	OFFICERS A	AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
IIITE	PD		DELETE	1,1 TI	ΠE	1	☐ Change ☐ Addition		
NAME	DEBARROS, GEORGE A			1.2 NAME					
STREET ADDRESS	601 NE 3RD STREET		1.3 \$		REET	ADDRESS			
CITY-ST-ZIP	DANIA FL 33004			1.4 CF	TY-ST	-ZIP			
TITLE			DELETE	2.1 TI	ΠË		☐ Change ☐ Addition		
NAME			•	2.2 NA	ME				
STREET ADDRESS				. 2.3 ST	REET	ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		2.4 C	TY-S1	r-ZIP			
TITLE			DELETE	3,1 TIT	ΠĒ	-	☐ Change ☐ Addition ☐		
NAME				3.2 N	ME	- 1			
STREET ADDRESS				3.3 ST	REET	ADDRESS			
CITY+ST-ZIP				3.4. Ci	TY-SI	r-ZiP			
TITLE			DELETE	4.1 TD	TLE	- 1	☐ Change ☐ Addition		
NAME				4. 2 N	AME				
STREET ADDRESS				4.3 ST	REET	ADDRESS			
CITY-ST-ZIP				4.4 CT	TY-ST	-ZIP			
TITLE			DELETE	5.1 TIT		-	☐ Change ☐ Addition		
NAME				5.2 NA	_				
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP	<u> </u>			5.4 Cl		- ZIP			
TITLE			DELETE	6.1 TI			☐ Change ☐ Addition		
NAME				6.2 N/	ME				

CITY-ST-ZIP 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90084 046 ***150.00