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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F80580

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90126 036 \*\*\*150.00

Suite, Apt. #, etc.    Suite, Apt. #, etc.
Principal Place of Business  1 GROVE ISLE DR. SUITE 1010 MIAMI FL 33133  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed, 05/05/1982  2. Principal Place of Business 2a. Mailing Address 4. FEI Number 25 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required  City & State City & State  Country 28 Country 29 30 Fersonal Property Tax.  STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., \$1010 MIAMI FL 33133  Mailing Address 1 GROVE ISLE DR., \$1010 MIAMI FL 33133  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed, 05/05/1982  4. FEI Number 5. Certificate of Status Desired Fee Required 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Added to Fees 7 Trust Fund Contribution Added to Fees 7 Trust Fund Contribution Added to Fees 7 Trust Fund Contribution Added to Fees 7 Name and Address of Current Registered Agent  8 Name 8 Name 8 Name 8 Name 8 Strolzenberg, JACQUELINE 1 GROVE ISLE DR., \$1010 MIAMI FL 33133
MIAMI FL 33133  MIAMI FL 33133  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed, 05/05/1982  2. Principal Place of Business  2a. Mailing Address  4. FEI Number Sp-2188661  Suite, Apt. #, etc.  25. Certifcate of Status Desired  Fee Required  City & State  City & State  City & State  Zip Country  Zip Country  Zip Country  Applied F.  5. Certifcate of Status Desired Fee Required  Fee Required  5. Certifcate of Status Desired Fee Required  Fee Required  St.00 May Be Trust Fund Contribution Added to Fees  Zip Personal Property Tax.  9. Name and Address of Current Registered Agent  81 Name  STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., #1010 MIAMI FL 33133
2. Principal Place of Business  3. Date Incorporated or Qualifed,  05/05/1982  4. FEI Number  5. Certificate of Status Desired
2. Principal Place of Business  3. Principal Place of Business  4. FEI Number  59-2188661  Not Applied Fig.
2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 2c. City & State 2d. City & State 2d. City & State 2d. City & State 2d. Country 2d. City & State 2d. City &
21
Suite, Apt. #, etc.    Suite, Apt. #, etc.
22 City & State City & State 28 City & State 29 Country 29 Country 29 State Personal Property Tax.  9. Name and Address of Current Registered Agent  STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., #1010 MIAMI FL 33133  City & State City & City & Code City & City & City & City & Code City & Cit
Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., #1010 MIAMI FL 33133  Trust Fund Contribution Added to Fees  Trust Fund Contribution Added to Fees  8. This corporation owes the current year Intangible Personal Property Tax.  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)
Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., #1010 MIAMI FL 33133  81 Name  Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Zin Code
24 25 29 30 Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., #1010 MIAMI FL 33133  83 Personal Property Tax. Yes No  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)
9. Name and Address of Current Registered Agent  STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., #1010  MIAMI FL 33133  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)
STOLZENBERG, JACQUELINE 1 GROVE ISLE DR., #1010 MIAMI FL 33133  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)
1 GROVE ISLE DR., #1010 MIAMI FL 33133  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33133 83
94 City 95 Zin Code
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 purposed changing its register.
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation Stufflic Into State Interior for purpose of Changing Interior 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, typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
TITLE P DELETE 1.1 TITLE Change A
NAME STOLZENBERG, JACQUELINE 1.2 NAME STREET ADDRESS 1 GROVE ISI F DR #1010 1.3 STREET ADDRESS
1 Girth Carlot Strip 1010
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STREET ADDRESS   3.3 STREET ADDRESS   3.4 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 changes or on an attachment with an address, with all other like empowered.

SIGNATURE: