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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT #

1. Corporation Name -

Principal Place of Business Mailing Address								
2255 GLADES F	RD.	2255 GLADES RD.						
SUITE 324 SUITE 324						DO NOT WRITE IN THI	S SPACE	
BOCA RATON FL 33431 BOCA RATON FL 33431						3. Date Incorporated or Qualifed	3 STACE	<del></del>
						08/30/1994		
a Diania (D	lace of Business	2a. Mailing Address				4. FEI Number	Anı	plied For
— '	lace of business	26				94-2880680		t Applicable
Suite, Apt.		Suite, Apt. #, etc.			<del>-</del>		\$8.75 A	
						5. Certifcate of Status Desired	Fee Re	
City & State	City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23	¬					Trust Fund Contribution	Added to	•
Zip	Country Zip Coul			ntry		8. This corporation owes the current year le	ntangible	
24	25	29	30			Personal Property Tax.		□No
	9. Name and Address of Curre		1			10. Name and Address of New Registere	d Agent	
	-		7	81	Name			
LEDI	NICZKY, FERENC		ļ	82	Stroot Addro	ss (P.O. Box Number is Not Acceptable)	<del></del>	
	00 SENTERRA DR.			62	Street Addre	iss (F.O. Box Number is Not Acceptable)		
DELI	RAY BEACH FL 33484		ţ	83				
						<u> </u>	85 Zip C	
	- *			84	City	· · · F.	L 85 Zip C	,ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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								
40	Signature, typed or printed name of registered age	ND DIRECTORS	13.	Agent	signature requireo	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
12.	PD	DELETE	1,1 111	Œ		ADDITIONO/OFFICE TO GIT TO LINE	Change	Addition
NAME	LEDNICZKY, FERENC		1.2 NA					
STREET ADDRESS	16700 SENTERRA DR.				ADDRESS			
	DELRAY BEACH FL 33484		1351	REET		v.		1
CITY-ST-ZIP					'- 7IP			1
NAME	VCT		1.4 CIT	TY-ST	-ziP		☐ Change	Addition
TWOVIE	VST GAEENEY VICTORIA	<b>₹</b> oelete	1.4 CIT 2.1 TIT	TY-ST TLE	-ZIP		Change	Addition
070557 4000500	GAFFNEY, VICTORIA	<b>X</b> DELETE	1.4 CT 2.1 TIT 2.2 NA	TY-ST TLE VME			☐ Change	Addition
STREET ADDRESS	GAFFNEY, VICTORIA 21 DEER RUN CIR.	<b>X</b> DELETE	1.4 CTT 2.1 TIT 2.2 NA 2.3 STT	TY-ST TLE VME REET	ADDRESS		☐ Change	Addition
CITY-ST-ZIP	GAFFNEY, VICTORIA	▼ DELETE	1.4 CT 2.1 TIT 2.2 NA	TY-ST TLE WME TREET	ADDRESS		☐ Change	Addition
CITY_ST-ZIP	GAFFNEY, VICTORIA 21 DEER RUN CIR.	- Control Cont	1.4 CT 2.1 TIT 2.2 NA 2.3 ST - 2.4 CF 3.1 TIT	TY-ST TLE WME TREET TY-ST TLE	ADDRESS		<del></del>	
CITY_ST-ZIP TITLE NAME	GAFFNEY, VICTORIA 21 DEER RUN CIR.	- Control Cont	1.4 CII 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA	TY-ST TLE ME REET TY-ST TLE	ADDRESS		<del></del>	
TITLE NAME STREET ADDRESS	GAFFNEY, VICTORIA 21 DEER RUN CIR.	- Control Cont	1.4 CП 2.1 TIT 2.2 NA 2.3 STI 3.1 TW 3.2 NA 3.3 STI	TY-ST TLE WE REET TY-ST TLE WE REET	ADDRESS  ADDRESS		<del></del>	
CITY_ST, ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	GAFFNEY, VICTORIA 21 DEER RUN CIR.	- Control Cont	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 3.1 TIT 3.2 NA 3.3 STI 3.4 CI	TY-ST TLE WE TY-ST TLE WE TREET	ADDRESS  ADDRESS		<del></del>	
CITY ST, ZIP.  TITLE  NAME  STREET ADDRESS  CITY ST - ZIP  TITLE	GAFFNEY, VICTORIA 21 DEER RUN CIR.	DELETE	1.4 CII 2.1 TII 2.2 NA 2.3 STI 3.1 TII 3.2 NA 3.3 STI 3.4 CI 4.1 TII	TY-ST TLE WE REET TY-ST TLE WE REET TY-ST	ADDRESS  ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	GAFFNEY, VICTORIA 21 DEER RUN CIR.	DELETE	1.4 CII 2.1 TIT 2.2 NA 2.3 STI 3.1 TW 3.2 NA 3.3 STI 3.4. CI 4.1 TIT 4.2 NA	TY-ST TLE ME REET TY-ST TLE REET TTY-ST REE TREE	ADDRESS ADDRESS T- ZIP		☐ Change	Addition
CITY-ST-ZIP TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	GAFFNEY, VICTORIA 21 DEER RUN CIR.	DELETE	1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CF 3.1 TIT 3.2 NA 3.3 ST 3.4 CT 4.1 TIT 4.2 NA 4.3 ST	TY-ST TLE ME REET TY-ST TLE MME REET TTY-ST TLE AME	ADDRESS T-ZIP ADDRESS ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	GAFFNEY, VICTORIA 21 DEER RUN CIR. SAN.JOSE CA 95136	☐ DELETE	1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CF 3.1 TIT 3.2 NA 3.3 ST 4.1 TIT 4.2 NA 4.3 ST 4.4 CF	TY-ST TLE  ME TY-ST TLE  ME TY-ST TLE  AME TY-ST TY-ST TY-ST	ADDRESS T-ZIP ADDRESS ADDRESS		☐ Change	Addition
CITY_ST, ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST_ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST_ZIP  TITLE	GAFFNEY, VICTORIA 21 DEER RUN CIR. SAN.JOSE CA 95136	DELETE	1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CF 3.1 TIT 3.2 NA 3.3 ST 3.4 CT 4.1 TIT 4.2 NA 4.3 ST	TY-ST TLE  ME REET TY-ST TLE  AME REET TY-ST TLE TY-ST TLE	ADDRESS T-ZIP ADDRESS ADDRESS		Change	Addition Addition
CITY_ST, ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST_ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST_ZIP  TITLE  NAME	GAFFNEY, VICTORIA 21 DEER RUN CIR. SAN.JOSE CA 95136	☐ DELETE	1.4 CT 2.1 TIT 2.2 NA 2.3 ST 3.1 TT 3.2 NA 3.3 ST 3.4 CT 4.1 TIT 4.2 NA 4.3 ST 4.4 CT 5.1 TIT 5.2 NA	TY-ST TLE ME REET TY-ST TLE ME REET TY-ST TLE AME REET TY-ST TLE MME	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP		Change	Addition Addition
CITY_ST, ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST-ZIP  TITLE  NAME  STREET ADDRESS	GAFFNEY, VICTORIA 21 DEER RUN CIR. SAN.JOSE CA 95136	☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.2 ST 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST	TY-ST TLE TY-ST TY-ST TLE TY-ST TRE	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS -ZIP		Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	GAFFNEY, VICTORIA 21 DEER RUN CIR. SAN.JOSE CA 95136	DELETE	1.4 CT 2.1 TIT 2.2 NA 2.3 ST 3.1 TT 3.2 NA 3.3 ST 3.4 CT 4.1 TIT 4.2 NA 4.3 ST 4.4 CT 5.1 TIT 5.2 NA	TY-ST TLE  WHE  REET TY-ST TLE  WHE  REET TY-ST TLE  WHE  REET TY-ST TLE  WHE  REET TY-ST TLE	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS -ZIP		Change	Addition Addition
CITY_ST, ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY_ST-ZIP  TITLE  NAME  STREET ADDRESS	GAFFNEY, VICTORIA 21 DEER RUN CIR. SAN.JOSE CA 95136	☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST 5.3 ST 5.4 CIT	TY-ST TLE  ME REET TY-ST TLE	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS -ZIP		Change	Addition 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 an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

999-4340