FILED

Jul 21, 1999 8:00 am

Secretary of State

07-21-1999 90009 021 ***550.00

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DO NOT WRITE IN THIS SPACE

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address 6345 BALBOA BLVD

EUCINO CA 91316

SUITE 112

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600002599

ALPINE ASSETS, INC.

Principal Place of Business

6345 BALBOA BLVD

ENCINO CA 91316

SUITE 112

US		US				3. Date Incorporated or Qualified 06/10/1996			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number 33-0684224	Applied For Not Applicab	\neg	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	Cou	ntry		This corporation owes the current year Intangible Personal Property.	Yes No		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
PARACORP INCORPORATED 236 EAST 6TH AVENUE TALLAHASSEE FL 32303				81 82 83 84	Street Addre	Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code			
office or	to the provisions of sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligations of the section	of Florida. Such change was tions of, section 607.0505, Fl	authorize lorida Stat	d by tutes.	the corporatio	ation submits this statement for the purpose of chin's board of directors. I hereby accept the appoint	anging its registered ntment as registered	2	
12.	DIRECTORS	<u>·</u>	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12			
TITLE	D LONG, JOHN S	DELETE	1.1 TI				Change Additi		
STREET ADDRESS	REET ADDRESS 300 CONTINENTAL BLVD., SUITE 360			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			İ		
CITY-ST-ZIP					ZIP				
TITLE	D SOSSIES SUSSIES	DELETE	2.1 TT		1		Change Additi	JON	
NAME	ROSENFELD, EUGENE S			2.2 NAME					
STREET ADDRESS				2.3 STREET ADDRESS		•			
CITY-ST-ZIP	EL SEGUNDO CA 90245		2.4 CI	TY-ST-	ZIP				
TITLE	D DELETE		3.1 TI	3.1 TITLE			Change Addit	üon	
NAME	SANDLER, RICHARD V		3.2 N	AME					
STREET ADDRESS	844 MORAGA DR		3.3 ST	REET	ADDRESS				

3.4 CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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5.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

__ DELETE

DELETE

DELETE

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.

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

D

TITLE

NAME

TITLE

NAME

TITLE

NAME

LOS ANGELES CA 90049

LOS ANGELES CA 90049

300 CONTINENTAL BLVD., SUITE 360

BEISSWANGER, MARK

EL-SEGUNDO CA-90245

GREEN, JEFFREY M

844 MORAGA DRIVE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRECTOR

7/9/99 (818) 758-8888

6345 BALBOA BLVD, 112 FNO.NO. PA 91316 L Change Addition

Change Addition

Change