## 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 # F97000001958

Country

9. Name and Address of Current Registered Agent

25

CORPORATION SERVICE COMPANY

TALLAHASSEE FL 32301-2525

1201 HAYS STREET

1. Corporation Name

PSAF DEVELOPMENT, INC.

Principal	Place	of	Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

701 WESTERN AVE. #200 GLENDALE CA 91201

701 WESTERN AVE., #200 GLENDALE CA 91201

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

29

Zip

## FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90066 049 \*\*\*150.00



Date Incorporated or Qualifed		
04/15/1997		
FEI Number		Applied For
95-4627051		Not Applicable
Certifcate of Status Desired		\$8.75 Additional Fee Required
Election Campaign Financing Trust Fund Contribution	П	\$5.00 May Be Added to Fees

DO NOT WRITE IN THIS SPACE

□No ☐ Yes Personal Property Tax. 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 83 Zip Code 84 85

8. This corporation owes the current year Intangible

3.

4.

5.

6.

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.

City

Country

30

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition ☐ DELETE 1.1 TITLE PCEO: TITLE 1.2 NAME LENKIN, HARVEY NAME STREET ADDRESS '701 Western Ave., #200 1.3 STREET ADDRESS **GLENDALE CA 91201** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE **CFO** 2.1 TITLE REYES, JOHN 2.2 NAME NAME 701 WESTERN AVE., #200 2.3 STREET ADDRESS STREET ADDRESS **GLENDALE CA 91201** 2.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ DELETE ☐ Change 3.1 TITLE TITLE **VC00** NAME PHELPS, CARL B 3.2 NAME 701 WESTERN AVENUE 3.3 STREET ADDRESS STREET ADDRESS **GLENDALE CA 91201** 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME HASS, SARAH NAME 4.3 STREET ADDRESS 701 WESTERN AVE., #200 STREET ADDRES **GLENDALE CA 91201** CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE 5.1 TITLE TITLE A. Timothy Scott 701 Western Ave. 5.2 NAME WEBSTER, JILL L 5.3 STREET ADDRESS STREET ADDRESS 701 WESTERN AVE., #200 54 CITY-ST-ZIP GLENDALE CA 91201 CITY-ST-ZIP Addition 6.1 TITLE ☐ Change ☐ DELETE TITLE AS 6.2 NAME GOLDBERG, DAVID NAME 6.3 STREET ADDRESS 701 WESTERN AVE., #200 STREET ADDRESS **GLENDALE CA 91201** 6.4 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 changed, or on an attachment with an address, with all other like empowered.



CR2E034 (1.1/98)