## 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 # EOOOOOOCOOT

1. Corporation	T 49178, INC.	000007					
Principal Place of Business Mailing Address				<u> </u>	- I INDIIAA IIID SUIRI IDIIS SUIII ADSII ADIII BUII	) <b>BO</b> ELS BILLS BELLS BELLS	
1900 SUMMIT TOWWER BLVD., STE 860 1900 SUMMIT TOWWER BLVD.			D., STE 860	)		,	
ORLANDO FL 3	2810	ORLANDO FL 32810			DO NOT WRITE IN THE	SSDACE	
					3. Date Incorporated or Qualifed	3 31 702	
					10/28/1998		1
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applie	ed For
21 26		-			APPLIED FOR	Not A	pplicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Add	ditional	
22		27		5. Certificate of Status Desired	Fee Requ	ired	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution	Added to F	Fees
Zip Country		Zip	<u>-</u>		8. This corporation owes the current year Intangible Personal Property Tax		
24	[25]	29 3	0		Personal Property Tax.  10 Name and Address of New Registered		INO
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Keyistered	Agent	
C T CORPORATION SYSTEM		Name					
1200 SOUTH PINE ISLAND ROAD			82 Str		ess (P.O. Box Number is Not Acceptable)		
	NTATION FL 33324		83				
	•						
			84	City	FI	85 Zip Cod	de
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statutes	, the above	e-named corpo	oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the submits of the sub		gistered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was auti	horized by	the corporatio	n's board of directors. I hereby accept the appo	ointment as regis	tered (
=	in familiar with, and accept the obliga	tions of, section our bood, i long	ia Statutes	•			
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: R	egistered Agen	t signature required	when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PCD	☐ DELETE	1.1 TITLE			Change	Addition
NAME	NEW, ROBERT		1.2 NAME		·		Ì
STREET ADDRESS	10800 BISCAYNE BLVD		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP			T Addition
TITLE	VT	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	NEW, JONATHAN		2.2 NAME				ļ
STREET ADDRESS			2.3 STREET	ADDRESS			1
-CITY ST ZP====			2.4 CITY-S	T-ZIP		Change	THE RESIDENCE OF THE PARTY OF T
TITLE	V .	☐ DELETE	3.1 TITLE	1		C Griange	T VOOIDOI! T
NAME	CHAIT, DANIEL		3.2 NAME				}
STREET ADDRESS	10000 0.000.11.1.0			ADDRESS			
CITY-ST-ZIP	MIAMI FL	☐ DELETE	3.4. CITY- S	ST-ZIP		☐ Change	Addition
TITLE	V CILEO DICHADD	☐ VELETE	4.1 TITLE 4. 2 NAME			onange	
NAME	GILES, RICHARD			T 40000000			
STREET ADDRESS	383 LONG HILL DRIVE SHORT HILLS NJ			T ADDRESS			
CITY-ST-ZIP	A SUCK! LIFTS MA	☐ DELETE	4.4 CITY-S' 5.1 TITLE	1-211		Change	Addition
TITLE NAME	LIPPMAN, WAYNE		5.1 NAME			<del></del> -	
STREET ADDRESS	9420 SW 77TH AVENUE			T ADDRESS			)
CITY-ST-ZIP	MIAMI FL		5.4 CITY-S				
TITLE	V	DELETE 6.1				☐ Change	Addition
NAME	CAUFFMAN, STUART		6.2 NAME				
STREET ADDRESS		6.3		TADDRESS			-

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, will all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: \_

moran

Daytime Phone #

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90021 005 \*\*\*150.00