## 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 # G33883

1. Corporation Name

XINIM CORPORATION

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## **FILED** Jan 25, 1999 8:00am **Secretary of State**

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HOLLY HILL FL	32117-1736	HOLLY HILL FL 32117-1736			RITE IN THIS SPACE		
				3. Date Incorporated or Qualife	ed		
•		•		04/19/1983			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Appl	lied For	
21		26		59-2280609	Not a	Applicable :	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Ad	Iditional /	
22		27		5. Certificate of Status Desired	Fee Req	uired	
City & State	e	City & State		6. Election Campaign Financin	g _ \$5.00 M	lav Be	
23		28		Trust Fund Contribution	Added to		
Zip	Country	Zip	Country	8. This corporation owes the co	urrent vear Intangible		
24	25	<b>├</b> ─ '	30	Personal Property Tax.		JNo	
24	9. Name and Address of Curre		<del>50</del> ;	10. Name and Address of Nev	v Registered Agent		
	5. Name and Address of Odire	···	81 Name	Ju. ttalitu attached			
POLI	LIO, GEORGE E						
	N 12TH ST		82 Street	Address (P.O. Box Number is Not Acce	ptable)		
			83			(1	
	ER BEACH FL 32136		83			446. B	
\$14 je 6	THE WALL		84 City		85 Zip Co	ode	
· ·	هم ودو دد پيوندن	<sup>(e)</sup> i			PL		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for to oration's board of directors. I hereby according	he purpose of changing its re	egistered	
I office or r	registered eaght or both in the State	e of Florida. Such change was all	ithonzed by the comi	oration 5 doard of directors. I hereby act	zepi ille appointment as regi	istered	
anent la	m familiar with and accent the oblid	sations of Section 607.0505. Flore	ida Statutes.	•	, ,,		
agent. I a	m familiar with, and accept the oblig	pations of, Section 607.0505, Flor	ida Statutes.				
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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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP.

TITLE

NAME

□ DELETE

☐ Addition

☐ Change