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

May 05, 1999 8:00 am Secretary of State

05-05-1999 90236 006 ***150.00

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Principal Place	e of Business	Mailing Address			r control adia allia neral caracteristicana			
C/O SCOTT CONSTANTAKOS 1507 LANCE ROAD					DO NOT WRITE IN THIS SPACE			
1					3. Date Incorporated or Qualifed			
					10/28/1983			
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number	<u> </u>	olied For	
21		26			59-2346311	\$8.75 A	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	Fee Re		
City & Stat		27 City & State			6. Election Campaign Financing	\$5.00	May Be	
_ 5.7 5 5.5.5					Trust Fund Contribution	Added to		
			ountry	<u> </u>	8. This corporation owes the current year	r Intangible		
24	25	29 30			Personal Property Tax.		□No	
	9. Name and Address of Curre	nt Registered Agent		1	10. Name and Address of New Register	red Agent		
	10T11711700 000TT		81	Name				
	ISTANTAKOS, SCOTT		82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
	7 LANCE ROAD							
JUP	ITER FL 33469		83	1	**	ر در	"特特"。	
			84	City		85 Zip C	ode- "	
-				<u> </u>	oration submits this statement for the purpos	CL	registered	
agent. I a	am familiar with, and accept the obligation of t	ations of, Section 607.0505, Florida S ent and title if applicable. (NOTE: Registe	red Age	nt signature required		E		
12.	OFFICERS AND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	Addition	
TITLE .	DP	_	1 TITLE			☐ Change		
NAME	CONSTANTAKOS, SCOTT		2 NAME					
STREET ADDRESS				TADDRESS				
C/TY-ST-ZIP	JUPITER, FL 00000	· · · · · · · · · · · · · · · · · · ·	4 CITY-S 1 TITLE	ST-ZIP		☐ Change	Addition	
TITLE	D CONSTANTAKOS IEANINE	_	2 NAME			_ ,	_	
NAME CTREET ADORESE	CONSTANTAKOS, JEANNE	1		T ADDRESS				
STREET ADDRESS	1507 LANCE ROAD JUPITER FL		4 CITY-1					
CITY-ST-ZIP	D-miner ru		1 TITLE			Change	Addition	
NAME	DRASNER, DANIEL	3.	2 NAME	1	•			
STREET ADDRESS		3.	3 STREE	TADORESS				
CITY-ST-ZIP	TEQUESTA FL	3.	4. CITY-5	ST-ZiP				
TITLE	D	☐ DELETE 4.	1 TITLE			Change	☐ Addition	
NAME	DRASNER, PATRICIA	1 4.	2 NAME					
STREET ADDRESS		4.	3 STREE	TADDRESS				
CITY-ST-ZIP	TEQUESTA FL		4 CITY-S	ST-ZIP			C Addison	
TITLE		-	1 TITLE			☐ Change	Addition	
NAME		5.	2 NAME					
STREET ADDRESS	1		A AT	TADDDEEA				
	5			T ADDRESS				
CITY-ST-ZIP		5.	4 CITY-9		<u> </u>	Change	☐ Addition	
CITY-ST-ZIP TITLE		5. DELETE 6		ST-ZIP		☐ Change	Addition	

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 any address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

NAME:

STREET ADDRESS