


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Feb 27, 1999 8:00 am**  
**Secretary of State**

02-27-1999 90028 003 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS																																																																																					
<b>DOCUMENT # G67188</b> 1. Corporation Name <b>MEYER VENTURES, INC.</b>																																																																																							
Principal Place of Business <b>6900 UNIVERSITY DR          TAMARAC FL 33321</b>		Mailing Address <b>6900 UNIVERSITY DR          TAMARAC FL 33321</b>																																																																																					
2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip Country		2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip Country																																																																																					
3. Date Incorporated or Qualified <b>10/31/1983</b>		4. FEI Number <b>59-2339082</b>																																																																																					
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																					
7. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		DO NOT WRITE IN THIS SPACE																																																																																					
9. Name and Address of Current Registered Agent <del>MEYER, JERRY</del> <del>6900 UNIVERSITY DRIVE</del> <del>TAMARAC FL 33321</del>		10. Name and Address of New Registered Agent <b>81 Name Helen Meyer</b> <b>82 Street Address (P.O. Box Number is Not Acceptable) 6900 N. University Dr.</b> <b>83 Tamarac, Fla. 33321</b> <b>84 City FL</b> <b>85 Zip Code 33321</b>																																																																																					
11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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.																																																																																							
SIGNATURE <i>Helen Meyer</i> Signature, typed or printed name of registered agent and fee if applicable.		Helen Meyer DATE 1/22/99																																																																																					
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>DP</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td>MEYER, JERRY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6900 UNIVERSITY DRIVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMARAC, FL 00000</td> <td></td> </tr> </table>		TITLE	DP	<input type="checkbox"/> DELETE	NAME	MEYER, JERRY		STREET ADDRESS	6900 UNIVERSITY DRIVE		CITY-ST-ZIP	TAMARAC, FL 00000		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>VP</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>1.2 NAME</td> <td>Jerry Meyer</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td>6900 N. University DR.</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td>Tamarac, Fla. 33321</td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>2.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td>DIR/PRES</td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>3.2 NAME</td> <td>Helen Meyer</td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td>6900 N. University DR.</td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP</td> <td>Tamarac, Fla. 33321</td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td>SECY</td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>5.2 NAME</td> <td>Steven Meyer</td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td>6900 N. University Dr.</td> <td></td> </tr> <tr> <td>5.4 CITY-ST-ZIP</td> <td>Tamarac, Fla. 33321</td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		1.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME	Jerry Meyer		1.3 STREET ADDRESS	6900 N. University DR.		1.4 CITY-ST-ZIP	Tamarac, Fla. 33321		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	2.2 NAME			2.3 STREET ADDRESS			2.4 CITY-ST-ZIP			3.1 TITLE	DIR/PRES	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	3.2 NAME	Helen Meyer		3.3 STREET ADDRESS	6900 N. University DR.		3.4 CITY-ST-ZIP	Tamarac, Fla. 33321		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME			4.3 STREET ADDRESS			4.4 CITY-ST-ZIP			5.1 TITLE	SECY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	5.2 NAME	Steven Meyer		5.3 STREET ADDRESS	6900 N. University Dr.		5.4 CITY-ST-ZIP	Tamarac, Fla. 33321		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.2 NAME			6.3 STREET ADDRESS			6.4 CITY-ST-ZIP		
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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 or without the same empowered.

SIGNATURE: *Jerry Meyer*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JERRY MEYER

1/22/99 (954) 721-4990  
 Date Daytime Phone #

CR2E034 (11/98)