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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **H28053** 1. Corporation Name

## FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90024 050 \*\*\*150.00

OLD CR	DW, INC.					. (Bangs Ging 1300) (815 8000 411 816) 816) 816) 816) 816) 816) 816) 81	
Principal Place	of Business	Mailing Address			_	1 TBB/BIT BLIN TINGE HOLL OPINI BLIND TILL NIGHT WINTE OLDER OFBIE BLOCK CONT.	
ļ .	ST 70TH AVENUE	2221 NORTHWEST 70TH AVENUE					
SUNRISE FL 33		SUNRISE FL 33313				DO MOT MUDITE IN THIS SPACE	
ļ						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed	
		2a. Mailing Address				10/31/1984 4. FEI Number Applied For	
<del> </del>	ace of Business					59-2476763 Not Applicable	
21 Suite, Apt.	# ***	26     Suite-Apt:#;etc				\$8.75 Additional	
22		27				5. Certifcate of Status Desired Fee Required	ĺ
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip Country				8. This corporation owes the current year Intangible	i
24	25	29 30				Personal Property Tax. Yes No	
	9. Name and Address of Current	Registered Agent		041	N	10. Name and Address of New Registered Agent	
BICL	IOD ADTILLID I			81	Name		
BISHOP, ARTHUR J. 2221 N.W. 70TH AVENUE				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
SUNRISE FL 33313				83			ı
SUN	NISE FL 33313			83			
1				84	City	FL 85 Zip Code	1
	4 0 - 40 - 607 0500	and CO7 1509 Florido Statute	e the	bove	-named co	ornoration submits this statement for the purpose of changing its registered	Į
l office or n	egistered agent, or both, in the State o	of Florida. Such change was at	ithonze	a by i	tne corpora	ration's board of directors. I hereby accept the appointment as registered	ĺ
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flor	ida Sta	tutes.			ĺ
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registere	d Agen	t signature regu	quired when reinstating) DATE	ء
12.	OFFICERS ANI					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ğ
TITLE	PST	☐ DELETE	1,1 7	1,1 TITLE		☐ Change ☐ Addition	ξ
NAME	BISHOP, ARTHUR JAMES		1.2 1	1.2 NAME		}	. ?
STREET ADDRESS	444 A		1.3 9	1.3 STREET ADDRE			Й
CITY-ST-ZIP	SUNRISE FL		1.4 0	1.4 CITY-ST-ZIP			ؤ
TITLE	D	DELETE	2.1 1	2.1 TITLE		☐ Change ☐ Addition	`
NAME	BISHOP, ARTHUR JAMES		2.2 NAME				ì
STREET ADDRESS	2221 N.W. 70TH AVENUE		2.3 STREET		ADDRESS		
CITY-ST-ZIP			_	2.4 CITY-6T-ZIP		☐ Change ☐ Addition	广
TITLE	V	DELETE	3.11				
NAME	BISHOP, JOSEPH P			IAME	ADODECO		
STREET ADDRESS	958 LAURA ST.		3.4. CITY-ST		ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL	DELETE		TITY-S TILE	1-414	· Change Addition	
TITLE ·	d Bishop, Joseph P			NAME			
NAME STREET ADDRESS	958 LAURA ST.		4.3 STREET ADDR		ADORESS		ļ
	CASSELBERRY FL		4.4 CITY-S1		i		
CITY-ST-ZIP	CAUGULDEINII I E	☐ DELETE	_	5.1 TITLE		☐ Change ☐ Addition	1
NAME				5.2 NAME			ĺ
STREET ADDRESS		•	5.3 9	5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 8	5.4 CITY-ST-ZIF			
TITLE		☐ DELETE	6.1	6.1 TITLE		. Change Addition	
NAME			6.21	6.2 NAME		·	1
STREET ADDRESS			6.3 STREET ADDRESS		ADDRESS		i
CITY ST. ZIP		6		CITY-ST	r-ZiP		1

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 supplied and 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 feceiver 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 a pattachment with an address) with all other like empowered.

SIGNATURE: