## 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 # H34173**

1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

1826 AUSSES ( 1

MORNIE FORT FO

JOS	SEPH L. HALESKI, INC.				ĺ			
	•	•			1 (23)311 0100 1011 0100 1101 1101 11	HOR OUT ALOU	A PAST BIÐU ÁTÐU	BREG THE LEAD
							OLAK EKEK ELEK	
Principa	I Place of Business	Mailing Address				<b>1888</b>   KRI <b>8</b> 18  K	Bibli bibli bibli	01011 01011 1801
	BER ST.	3826 BEBER ST.			*			
NORTH:	PORT FL 34287-2929	NORTH PORT FL 34287-2929	,	•	•			•
100000 1000 1000 1000 1000 1000 1000 1					DO NOT WRITE IN THIS SPACE			•
					3. Date Incorporated or Qualifed	10 04 11110	OFACE	
					12/14/1984			\$3.55 \ L
Principal Place of Business 2a. Mailing Address					4. FEI Number	•••	<del></del>	<u>}}</u>
21	26				59-2475321		<del></del>	oplied For
Suite, Apt. #, etc. Suite, Apt. #, etc.			<del></del>		39 2473321			ot Applicable
22				•	5. Certifcate of Status Desired	図	<b>,</b>	Additional
22   27   City & State   City & State							<del></del>	equired
					6. Election Campaign Financing			May Be
23 Zip	28				Trust Fund Contribution		Added	to Fees
	Country Zip Co			ry	8. This corporation owes the curr	ent year Int	•	_
24	25	29 3	0	•	Personal Property Tax.		☐ Yes.	Σ¢Νο
	9. Name and Address of Current	Registered Agent		al	10. Name and Address of New F	Registered	Agent	
,	CUMMINS, B.J.		8	1 Name				
400 S.E. EIGHTH STREET				2 Street Add	Idress (P.O. Box Number is Not Acceptable)			
FORT LAUDERDALE FL 33316					s. Billioner, B. Thirte is Armed Cross Longwell and Reflect bright origin of the Respect by Joseph Comment			
FORT DAUDERDALE FL 33310								
			8	4 64	TRANSPORT OF A STATE OF THE STA	<b>经,相外的</b>	1,40 303	\$1500 \$1200 E500
2111 18 131 1	re no Zer		•	4 City		FI	85 Zip (	Lode
11, Pur	suant to the provisions of Sections 607.0502	and 607,1508, Florida Statutes	, the abo	ve-named cor	poration submits this statement for the	purpose of	changing its	registered
offic	suant to the provisions of Sections 607.0502 to or registered agent, or both, in the State ont. I am familiar with, and accept the obligati	f Florida.' Such change was authors of Section 607 0505. Florid	horized b	y the corporati	ion's board of directors. I hereby accep	t the appoi	ntment as re	gistered
		5/13 5/1, 00040/1 507.0005, 1 10/14	a Clarate		•			
SIGNAT	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Ag	ent signature require	ed when reinstating)	DATE	· · · · · ·	1
12.	OFFICERS AND		13.	<u>`</u>	ADDITIONS/CHANGES TO OF		ID DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	T.	50,2475(2)		☐ Change	Addition
NAME	HALESKI, JOSEPH L.		1.2 NAME	- 1	12 10 2 1 M 30 30 8		—. ·	_
STREET AD	ACCA DEEDED AT	•		ET ADDRESS .				
CITY-ST-Z	NAME AND THE							
TITLE	D	☐ DELETE	1.4 CITY- 2.1 TITLE	51-ZIP		·-	☐ Change	Addition
NAME	CUMMINS, B.J.	_ occert					☐ Change	☐ Addition
STREET AD		i	2.2 NAME		·			}
				ET ADDRESS	1			
CITY-ST-ZI	FORT LAUDERDALE FL 1		2. 4 CITY-	ST-ZIP				
TITLE	COMMENCE SIL	☐ DELETE	3.1 TITLE		,		Change	☐ Addition
NAME	JOO SE LEASTR'S LAST		3.2 NAME		•			
STREET AD	PORTE CALIFORNIA F FE SERVE	•	3.3 STREE	ET ADDRESS	Constitution of the state of th	ner sterie	44 8180, 9840 S	631, 9:51) (\$81
CITY-ST-ZI			3.4, CITY-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE		र प्राप्त है। है जो क्षाप्त <b>इ</b> प्यूप्त क्षाप्त की	B. 图 4.50 \$	Change	Addition
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STREET AD		THE SECTION OF THE SE	4.3 STREE	TADORESS	•			
CITY-ST-ZII		40 1 4 4 1	4.4 CITY-8		•			-
TITLE		☐ DELETE	5.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	. Addition
NAME .			5.2 NAME		7. 17. N. C.		Shango	
·· <b>-</b>		. •			Company of the Compan	•	• • •	
STREET AD	ADEGG		5.3 STREE	I ABDRESS I				

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.

DELETE

5.4 CiTY-ST-ZiP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ Change

☐ Addition

**FILED** 

Jan 29, 1999 8:00am

**Secretary of State** 

01-29-1999 90007 012 \*\*\*158.75