PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H38726** 1. Corporation Name

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90178 019 ***150.00

	TURNER, P.A.				E NAKUKAN ANDA ANDA ANDA ARAKA ANDA BANDA BANDA BANDA	1811 BURN BIRIL B	(A))
Principal Place	e of Business	Mailing Address			()BEIST DIGE STON 10111 (BRIG ANDIR DALL BI	1861 MIBIL MIGIT M	
2916 DOUGLAS	ROAD	2916 DOUGLAS ROAD					
SUITE 3 CORAL GABLES FL 33134 SUITE 3 CORAL GABLES FL 33134					DO NOT WRITE IN THIS SPACE		
COUNT ONDERS LE 20124 COUNT ONDERS LE 20124					3. Date Incorporated or Qualifed		
					12/21/1984		
2. Principal P	lace of Business.	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2467659		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	~	5 Additional Required
22		27 City & State			O Flitte Ornation Finducing		00 May Be
City & State	•	⊢ - ',			6. Election Campaign Financing Trust Fund Contribution	•	led to Fees
Zip	Country	Zip	Country		This corporation owes the current year		
24	25		30		Personal Property Tax.	Yes	□No
-71	9. Name and Address of Curre				10. Name and Address of New Register	red Agent	
			81	Name			
TURNER, GUY W.			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
2916 DOUGLAS RD					t and the second se		
CUH	IAL GABLES FL 33134		83	1			}
> 72 : : :::::::::::::::::::::::::::::::		THE ALL SECTIONS AND THE LIGHTLES	84	. City		F 85	Zip Code
交替版"A"的形式		1007 (500 Flatter)	Section 1	o named co			a its registered
11: Pursuant	egistered agent, or both, in the State	of Florida. Such change was auf	thorized by	the corporal	poration submits this statement for the purposition's board of directors. It hereby accept the a	ppointment a	s registered
agent. I a	m familiar with; and accept the oblig	ations of, Section 607.0505, Flore	da Statutes	5.			
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: F	Registered Age	nt signature requi	red when reinstating) DATI	E	
12. ·							
	00207.	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
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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 suppliemental 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.

I'URE RESUIRED SIGNATURE: