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

Mailing Address

P O ROY 3746

218 DATURA STREET

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # H90298**

Principal Place of Business

218 DATURA STREET

P O ROY 3746

BRACKETT, SNED, WELCH, D'ANGIO, TUCKER & FARACH.

WEST PALM B	EACH FL 33402	WEST PALM BEACH FL 33402					DO NOT WRITE IN THIS SPACE						
						3.	3. Date Incorporated or Qualifed						
							12/17/1985	,					
2. Principal P	lace of Business	2a, Mailing Address	Mailing Address				FEI Number			A	pplied For		
21		26					59-263077	6		T	lot Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.										\$8.75	Additional		
22 27						5.	Certifcate of S	tatus Desired		Fee F	Required		
City & State City & State						6	Election Camp	algn Financing	_	\$5.00	May Be		
23							Trust Fund Co	-			to Fees		
Zip				try		8	This corporation	on owes the curre	ent vear Ir	ntancible			
24	25 29			30				Personal Property Tax. ☐ Yes ☐ No					
<u></u>	9. Name and Address of Current					10.		Idress of New R	egistered	d Agent			
			8	31	Name								
SNED, WILLIAM H JR			20 01 141			4 1 1 75		* 11 1 4 1					
218	DATURA STREET		82 Street Ad			Address (P	O. Box Numbe	er is Not Accepta	ble)				
WES	T PALM BEACH FL 33402		83										
]							•						
İ			8	34	City				FI	85 Zip	Code		
44 Purcuant	to the provisions of Sections 607.0502	and 607 1508 Elorida Statutes	the abo	)VO 1	hamed	corporation	 a cubmite this e	tatement for the			e registered		
office or r	egistered agent, or both, in the State o	f Florida. Such change was auth	horized b	oy th	e corpo	oration's bo	ard of directors	s. I hereby accep	t the appo	ointment as r	egistered		
agent.la	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	ia Statuti	es.									
SIGNATURE													
<u></u>	Signature, typed or printed name of registered agent OFFICERS AND		<u>.                                      </u>	gent si	ignature re	equired when r	<del></del>		DATE		000 41 40		
12.	VD OFFICERS AND	DELETE	13.		$\overline{}$	VD	ADDITIONS/CF	IANGES TO OFF	ICERS A	Change			
	•	□ beleve					- a Pa	bert A.	.T	(A) Criainge			
NAME	D'ANGIO, ROBERT A.,JR.		1.2 NAM						٠,٠				
STREET ADDRESS	685 ROYAL PALM BCH BLVD		1.3 STRE	EET AL	DDRESS	ו פוכם	Dattura	Street					
CITY-ST-ZIP	ROYAL PALM BCH FL		1.4 CITY		<u> </u>	wes	t Palm	Beach,	<u>a</u>	<u>3340</u>	<del></del>		
TITLE	_		2.7 11722			1			Change	X Addition			
NAME	sned, William H, Jr		2.2 NAMI	Ε	ļ	せつけ	t, Will	iam E.					
STREET ADDRESS	218 DATURA STREET		2.3 STRE	ET AL	DDRESS	याहा	Dátura.	iam E. Street	<b>-</b>				
CITY-ST-ZIP	WEST PALM BEACH FL		2. 4 CITY	/-ST-2		سوچہ	t Palm	Beach	FL	<u> 334</u>			
TITLE	VD	X DELETE	3.1 TITLE	=		VO.				Change	Addition		
NAME	WELCH, EDWARD D		3.2 NAM	E		Put	- Willia	ans H.					
STREET ADDRESS	218 DATURA ST			3.3 STREET ADDRESS		1 کو ا⊊ہ	Datura	Stree	+				
CITY-ST-ZIP	WEST PALM BCH FL		3.4. CITY	'-ST-Z	Z!P	Wes	+ Pala	Stree	FL	. 3340	<b>)</b>		
TITLE	SD	☐ DELETE	4.1 TITLE				•			☐ Change	☐ Addition		
NAME	TUCKER, JOAN B.		4. 2 NAM	Œ									
STREET ADDRESS	218 DATURA STREET		4.3 STRE	ET AL	DORESS								
CITY-ST-ZIP	W.PALM BCH. FL		4.4 CITY		- 1			•					
TITLE	VD	DELETE	5.1 TITLE							Change	Addition		
NAME	FARACH, MANUEL	<u>-</u>	5.2 NAME										
STREET ADDRESS	218 DATURA ST		5.3 STRE	ETAC	ODRESS					•			
CITY-ST-ZIP	WEST PALM BCH FL		5.4 CITY-										
TITLE	TEST FACE DOTI FE	☐ DELETE	6.1 TITLE		-					☐ Change	☐ Addition		
NAME		_ 0222,2	6.2 NAME	E	1								
STDEET ADODESS			63 STRE		IDBESS								

6.4 CITY-ST-ZIP 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 officer or director of the corpora Block 12 or Block 13 if change with all other like empowered.

SIGNATURE:

Date

Daytime Phone #

**FILED** 

Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90011 019 \*\*\*150.00