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

FILED Feb 20, 1999 8:00 am Secretary of State 02-20-1999 90078 014 ***150.00

	1999		DIVISION OF	CORPOR	ATIONS		02-20-1999	90078 01	4 ***150.0	00
DOCU 1. Corporation	MENT # H90	0951		_						
•	IDUSTRIES, INC.									
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			`e.							
Principal Plac	ce of Business	Mailir	ng Address				1 1201011 0110 16111 00116 10101 1		11 5 11 615 11 61611 6	1511 21211 18B1
7091 ENVIRON	N BLÝD	7091	ENVIRON BLVD							
PHASE 1 STE			PHASE 1., STE 146				つかで)・・・ DO NOT WR	TE IN THIS	SPACE	
LAUDERHILL F	-F 3331a	LAUUE	ERHILL FL 33319		-	3.	Date Incorporated or Qualifed		OFFICE	
	سر پہارہ سب	* " 4 .	r beingerein		-		12/20/1985	,		
2. Principal Place of Business		2a. M	2a. Mailing Address			4.	FEI Number		Apr	lied For-
21		26					<u>59-2617281</u>		Not	Applicable
Suite, Apt.	. #, etc.	St	uite, Apt. #, etc.			5.	Certificate of Status Desired		\$8.75 A	
2		27					·		Fee Re	
City & Sta	ate		ity & State			6.	Election Campaign Financing Trust Fund Contribution : '8	Ò	\$5.00 to Added to	
Zip	Country	28		Cour	ntry	-	This corporation owes the cur			71 663
24	25	29	P	30	,	0.	Personal Property Tax.	t south Andrews		□No
	9. Name and Address		ed Agent			10.	Name and Address of New	Registered	Agent	HETTIE
					81 Name	_			4	-
FRIDKIN, JEROLD					82 Street	Address (F	P.O. Box Number is Not Accept	able)		-
7091 ENVIRON BLVD				1		·				
Phase I, suite 345 Lauderhill FL 33319					83					İ
					84 City				85 Zip C	ode
		007.0500 1.007	4500 Ft. : 1 - O				a submite this statement for the	FL		registered
office or	t to the provisions of Section registered agent, or both, in	the State of Florida.	Such change was a	uthorized	by the corpo	oration's b	n submits this statement for the oard of directors. I hereby acce	pt the appoi	ntment as req	istered
agent. I a	am familiar with, and accept	the obligations of, Se	ection 607.0505, Flo	rida Statu	tes.					
SIGNATURE	Signature, typed or printed name of	registered agent and title if ap-	plicable. (NOTE	. Registered /	Agent signature re	required when	reinstating)	DATE		is
12.		ICERS AND DIRECT		13.			ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTO	RS IN 12
TITLE	PD		☐ DELETE	1,1 TIT	E		,		Change	Addition
NAME	FRIDKIN, JEROLD			1.2 NA	VIE	1				
STREET ADDRESS				1.3 STF	REET ADDRESS					
CITY-ST-ZIP	LAUDERHILL FL		-		Y-ST-ZIP				Channa	
TITLE			☐ DELETE	2.1 Tm					Change	☐ Addition
NAME				2.2 NA						
STREET ADDRESS	5				REET ADDRESS					
CITY-ST-ZIP			DELETE	2. 4 CIT	Y-ST-ZIP	-		.,,,,	Change	Addition
TITLE NAME			□ OCCCIC	3.2 NAJ	i	1	,		<u></u> , o	_
STREET ADDRESS					REET ADDRESS					
CITY-ST-ZIP					ry-St-ZiP	1				
TITLE			DELETE	4.1 TIT	LE				Change	☐ Addition
NAME										I
STREET ADDRESS				4. 2 NA	WE					•
CITY-ST-ZIP	s				ME REET ADDRESS					.
0171-01-24	s		-	4.3 STF 4.4 C/T	REET ADDRESS Y-ST-ZIP					T a Janes
TITLE	5		☐ DELETE	4.3 STF 4.4 CIT 5.1 TITE	REET ADDRESS Y-ST-ZIP LE				☐ Change	Addition
TITLE NAME			☐ DELETE	4.3 STE 4.4 CIT 5.1 TITE 5.2 NAM	REET ADDRESS Y-ST-ZIP LE ME		· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
TITLE NAME STREET ADDRESS			☐ DELETE	4.3 STF 4.4 C/T 5.1 T/T 5.2 NAM 5.3 STF	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS		·		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				4.3 STF 4.4 CIT 5.1 TITE 5.2 NAM 5.3 STF 5.4 CIT	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP		·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			☐ DELETE	4.3 STF 4.4 C/T 5.1 T/T 5.2 NAM 5.3 STF	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	5	11		4.3 STF 4.4 CIT 5.1 TIT 5.2 NAM 5.3 STF 5.4 CIT 6.1 TIT 6.2 NAM	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	5	11		4.3 STF 4.4 CIT 5.1 TIT 5.2 NAN 5.3 STF 5.4 CIT 6.1 TIT 6.2 NAN 6.3 STF	REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE					

14. I hereby certify that the information supplied with the information supplied with the information indicated on this annual report or supplied entry a full 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 report or trusted 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 adaptiment with an address, with all other like empowered.

SIGNATURE: