PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90110 011 ***150.00

DOCUMENT # **H95621**

1. Corporation Name

ADAMHILL INVESTORS CORPORATION

Principal Place	of Business	Mailing Address					#1 #1#11 #1B1				
5530 COACH HOUSE CIRCLE P.O. BOX 4655 UNIT E DEERFIELD BEACH FL 33442 BOCA RATON FL 33486 US						DO NOT WRITE I	N THIS S	PACE			
US						3. Date Incorporated or Qualifed 01/23/1986					
2. Principal Place of Business 2a. Mailing Address 25						4. FEI Number 59-2630363	Applied For Not Applicable				
Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.7	5 Add	itional	
27						5. Certifcate of Status Desired	J	Fee	Requ	ired	
City & State City & State						6. Election Campaign Financing		\$5.0	00 ма	ay Be	
23	28			. Trust Fund Contribution]	Add	led to f	Fees	
Zip	Country Zip Con			untry 8. This corporation owes the current year Intangib			ıgible		,		
24	25 29 30					Personal Property Tax. Yes XNo					
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Regi	stered A	gent			
			81	Nan	ne						
WASCH, JOSEPH C					et Addre	ss (P.O. Box Number is Not Acceptable)				
5530 COACH HOUSE CIRCLE				00							
UNIT É											
BOCA RATON FL 33486			0.4	0'4				TOE -	Zip Co		
			84	City			FL	85 2	-ip 00		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the abov	e-nam	ed corpo	ration submits this statement for the pur	pose of ch	nanging	j its re	gistered	
l office or n	egistered agent, or both, in the State o m familiar with, and accept the obligation	i Fiorida. Such change was aut	inorized by	the co	orporation	's board of directors. I hereby accept th	e appoint	ment a	s regis	terea	
] -	m taiturai with, and accept the congati	ons or, section our todos, more	ua Statutes							ĺ	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Age	nt signati	re required	when reinstating)	DATE				
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	CTOR	S IN 12	
TITLE	PSD DELETE			1.1 TITLE				Chan	ige	☐ Addition	
NAME	WASCH, JOSEPH C.			1.2 NAME						ţ	
STREET ADDRESS 5530 E COACH HOUSE CIRCLE				1.3 STREET ADDRESS							
CITY-ST-ZIP BOCA RATON FL-33486				T-ZIP						ŀ	
TITLE			_	2.1 TITLE				☐ Chan	nge	Addition	
NAME	_ 1		2.2 NAME	i i						Ì	
	ł l			2.3 STREET ADDRESS							
STREET ADDRESS					.55						
CITY-ST-ZIP	DELETE			2.4 CITY-ST-ZIP 3.1 TITLE				☐ Char	nge	Addition	
TITLE) VELCTO			3.2 NAME				_	•		
NAME				T 4000C							
STREET ADDRESS			3.3 STREE		:55					!	
CITY-ST-ZIP				3.4. CITY-ST-ZIP				Char	nge	Addition	
~TITLE ~				i l					J-		
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREE		:SS t						
CITY-ST-ZIP		C) asiere	4.4 CITY-S	T-ZIP				☐ Char		Addition	
TITLE		☐ DELETE	5.1 TITLE						,gc		
NAME			5.2 NAME	*		·					
STREET ADDRESS	1		5.3 STREE		:55						
CITY-ST-ZIP			5.4 CITY-S	T-ZIP						□ Additio-	
TITLE		☐ DELETE	6.1 TITLE					☐ Char	rye	Addition	
NAME	}		6.2 NAME								

14. Thereby 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP