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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90025 012 ***150.00

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3440 HOL SUITE 450	LYWOOD BLVD.		3440 HOLLYWOOD BLVD. SUITE 450			1			
,	OOD FL 33021		HOLLYWOOD FL 33021			DO NOT WE	RITE IN THIS :	SPACE	
US	700 72 0002		US			3. Date Incorporated or Qualifed			
						08/21/1986		•	
2. Princi	pal Place of Business		2a. Mailing Address			4. FEI Number		App	olied For
21	· ·	. 2	26			59-2714561			Applicable
	Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 ∧	
22		2	27			5. Octahodic of Clarico Doctato		Fee Re	
City 8	State	* · * · .	City & State	•	بند⊷ ∞سند	- 6. Election Campaign Financing	и п — и	\$5.00	
23	· · · · · · · · · · · · · · · · · · ·	+	28			Trust Fund Contribution		Added to	Fees
Zip	. —	untry	Zip	Country		8. This corporation owes the cu			£
24	25 .		29 30)		Personal Property Tax.			Mo
	9. Name and Ad	Idress of Current Re	gistered Agent	81	Name	10. Name and Address of New	Registered A	rgent	
	GRAND, LEONARD			81	Name				
	3440 HOLLYWOOD BI	IVD		82	Street Add	ss (P.O. Box Number is Not Acceptable)			
	SUITE 450						-		
	HOLLYWOOD FL 3302	21		83					
	CELTIFOOD I E 3002	-1		84	City		~ ;	85 Zip C	ode
	1				L		FL	1 1	
11. Purs	uant to the provisions of Security or be	Sections 607.0502 an both, in the State of Fl	id 607.1508, Florida Statutes, Iorida. Such change was auth	the above orized by	e-named corp the corporati	poration submits this statement for th ion's board of directors. I hereby according	e purpose of c ept the appoin	manging its tment as reg	jistered
ager	t. I am familiar with, and	accept the obligations	of, Section 607.0505, Florida	a Statutes	3.	-			
SIGNAT	URE						DATE		
12.	Stoneture, bijed or printed i	name of registered agent and			nt signature recuire				
	i Organizació, typod or prantos					ed when reinstating) ADDITIONS/CHANGES TO O	_	D DIRECTO	RS IN 12
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6.4 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 empoyered 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/33/99 954/989-2889