PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # J38024** 

COFFECT NAME

## FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90118 025 \*\*\*150.00

	TTNER, CAHLIN & CO.	7) 1/28/98 Majjing Address	HLI	<i>N</i>	+60			
Principal Place		20590 W. DIXIE HWY.						
20590 W. DIXIE HWY. N. MIAMI BEACH FL 33180 N. MIAMI BEACH FL 33180						DO NOT WEITS IN TH	C CDACE	
•						DO NOT WRITE IN TH  3. Date Incorporated or Qualifed	SPACE	
								ľ
		a Atalian Address				10/13/1986 4. FEI Number		Applied For
	face of Business	2a, Mailing Address				59-2724502	<del> </del>	Not Applicable
Suite, Apt.	# ata	Suite, Apt. #, etc.				<del></del>	\$8.7	5 Additional
22 Suite, Apr.	#, etc.	27				5. Certificate of Status Desired		e Required
City & State	e	City & State				6. Election Campaign Financing		00 May Be
23		28				Trust Fund Contribution		ied to Fees
Zip	- Country	- Zip -	~ Col	untry		8. This corporation owes the current year t		□No
24	25	29	30	1		Personal Property Tax.	☐ Yes	LINO
	9. Name and Address of Curren	nt Registered Agent		81	Name	10. Name and Address of New Registers	u Agent	
LEVI	, ALLEN			1	· ·			
	O HIGHLAND LAKES BLVD.			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		ŀ
	ITH MIAMI BEACH FL 33180			83				
, non	WITH MEAN DEPOT! I E 00100			""				
				B4	City	F	85	Zip Code
11. Pursuant office or nagent. La	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida, Such change was a tions of, Section 607.0505, Fk	tes, the a authorize orida Stat	bove-r d by th tutes.	named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment a	s registered
						0175		
	Signature, typed or printed name of registered age-			d Agent s	ignature required	d when reinstailing) DATE	AID DIDE	CTOPS IN 12
12.	OFFICERS AN	ID DIRECTORS	13.		ignature required	d when reinstelling) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTORS IN 12
12. TITLE	OFFICERS AN		13. 1.1 T	ITLE	Ignature required		ND DIRE	CTORS IN 12
12. TITLE NAME	OFFICERS AN LEVI, ALLEN	ID DIRECTORS	13, 1.1 T 1.2 N	ITLE AME			ND DIRE	CTORS IN 12
12. TITLE NAME STREET ADDRESS	OFFICERS AN PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV	ID DIRECTORS	13. 1.1 T 1.2 N 1.3 S	ITLE AME TREET AL	DORESS		ND DIRE	CTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL	ID DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C	ITLE AME TREET AL	DORESS		ND DIRE ☐ Cha	nge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP	ID DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T	ITLE AME TREET AL ITY-ST-Z	DORESS		Cha	nge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD	ID DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N	ITLE  AME  TREET AL  ITY-ST-2  ITLE  LAME	DORESS ZIP		Cha	nge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST	ID DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 G 2.1 T 2.2 N 2.3 S	TILE AME TREET AL ITY-S1-2 TILE TREET AL	DORESS DP		Cha	nge Addition
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12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST	ID DIRECTORS  DELETE	13. 1.17 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N	TILE  AME  TREET AL  TILE  TAME  TREET AL  CITY-ST-	DORESS ZIP DORESS ZIP		☐ Cha	nge Addition
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12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST MIAMI FL	ID DIRECTORS  DELETE  DELETE	13.5 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T	TILE  AME  TREET AI  TILE  TREET AI  TREET AI  TILE	DORESS ZIP  DORESS ZIP  DORESS DORESS		☐ Cha	nge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST MIAMI FL	D DIRECTORS  DELETE  DELETE	13.11 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C	TILE  AME  TREET AI  TILE  TREET AI  TREET AI  TILE	DORESS ZIP  DORESS ZIP  DORESS DORESS		☐ Cha	nge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE TITLE	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST MIAMI FL	D DIRECTORS  DELETE  DELETE	13.5 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N	TILE  AME  TREET AI  TILE  TREET AI  TREET AI  TILE	DORESS ZIP DORESS ZIP DORESS ZIP		☐ Cha	nge Addition
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST MIAMI FL	D DIRECTORS  DELETE  DELETE	13.5 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S	TILE  AME  TREET AI  TILE  TILE  TREET AI  TREET AI	DORESS ZIP DORESS ZIP DORESS ZIP DORESS		☐ Cha	nge Addition  nge Addition  nge Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST MIAMI FL	D DELETE  DELETE  DELETE	13.1111.2N 1.3.5 1.4.0 2.1.1 2.2.N 2.3.5 2.4.0 3.1.1 3.2.N 3.3.5 3.4.0 4.1.1 4.3.5 4.4.0 5.1.1 5.2.N 5.3.5 5.4.0 5.3.0 5.3.5 5.4.0 5.2.0 5	TILE  AME  TREET AI  TILY-ST-2  TILE  AME  TREET AI  TILE  AME  TREET AI  TILE	DORESS ZIP DORESS ZIP DORESS ZIP DORESS		☐ Cha	nge Addition  nge Addition  nge Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PT LEVI, ALLEN 21410 HIGHLAND LAKES BLV NO. MIAMI BEACH FL VP CAHLIN, RICHARD 7390 SW 115 ST MIAMI FL	D DELETE  DELETE  DELETE	13.11 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N	TILE  AME  TREET AI  TILY-ST-2  TILE  AME  TREET AI  TILE  AME  TREET AI  TILE	DORESS ZIP  DORESS ZIP  DORESS ZIP  DORESS ZIP		☐ Cha	nge Addition  nge Addition  nge Addition

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE.

AUDITOR OF HOME OF HOUSE OF SECTION

RICHARD CAHLIN 1-5.99

Daytima Phone #