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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

| 1. Corporation                              | VIEN 1 # J45846<br>IARDS, INC.  |   |               |                  |                  |  |                               |  |
|---|---|---|---------------|------------------|------------------|--|-------------------------------|--|
| Principal Place of Business Mailing Address |   |   |               |                  |                  | I (BOUTE BIS) BISDI FRIDI (BIS) BISH BISH BISH BISH BISH BISH  | ( 4) E( ( 6) E( ) ( ) ( )     |  |
| 6741 NW 66 WA<br>PARKLAND FL 3<br>US        | AY  | 6741 NW 66 WAY<br>PARKLAND FL 33067<br>US |               |                  |                  | DO NOT WRITE IN THIS SPACE   |                               |  |
|   |   |   |               |                  |                  | 3. Date Incorporated or Qualifed 12/08/1986  |                               |  |
| 2. Principal Pl                             | ace of Business   | 2a. Mailing Address                       | 3             |                  |                  | 65-0000163   | Applied For<br>Not Applicable |  |
| Suite, Apt. a                               | #, etc.   | Suite, Apt. #, et                         | c.            |                  |                  | e Contiferto of Status Desired   | Additional<br>Required        |  |
| City & State                                | 9   | City & State                              |               |                  |                  | 6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees  |                               |  |
| Zip   | Zip Country Zip   |   |               | Country<br>0     |                  | 8. This corporation owes the current year Intangible Personal Property Tax.  |                               |  |
|   | 9. Name and Address of Currer   | nt Registered Agent                       |               | $\Box$           |                  | 10. Name and Address of New Registered Agent   |                               |  |
| GRO   | CHOCKI, ROSEMARY  |   |               | 81               | Name             | (2.0.2)  |                               |  |
| 6741 NW 66 WAY<br>PARKLAND FL 33067         |   |   |               | 82<br>83         | Street Addr      | ress (P.O. Box Number is Not Acceptable)   |                               |  |
| ,,,,  |   |   |               | 84               | City             | FL 85 Zig  | Code                          |  |
| office or re                                | egistered agent, or both, in the State<br>m familiar with, and accept the oblig | of Florida, Such change                   | was authorize | tutes.           | the corporation. | poration submits this statement for the purpose of changing on's board of directors. I hereby accept the appointment as directors of the purpose of changing on's board of directors. I hereby accept the appointment as directors of the purpose of changing the purpose of c | 5                             |  |
| 12.   | OFFICERS AN   | ND DIRECTORS                              | 13.           |                  |                  | ADDITIONS/CHANGES TO OFFICERS AND DIRECT   |                               |  |
| TITLE                                       | PT  | ☐ DELI                                    | ETE 1.1 T     | TTLE             |                  | Change   | e ☐ Addition                  |  |
| NAME  | GROCHOCKI, ROSEMARY   |   | 1.2 N         | AME              |                  |  |                               |  |
| STREET ADDRESS                              | 6741 NW 66 WAY<br>PARKLAND FL   |   |               | TREET            | T-ZIP            |  |                               |  |
| TITLE                                       | VS  |   |               | TITLE            |                  | [] Changi  | e Addition                    |  |
| NAME  |   |   | 2.2 M         | MANE             |                  |  | ļ                             |  |
| STREET ADDRESS                              | 6741 NW 66 WAY  |   | 2.3 \$        | STREET           | F ADDRESS        |  | ļ                             |  |
| CITY-ST-ZIP                                 | Parkland FL   | _   | 2.4           | CITY-S           | T-ZIP            |  |                               |  |
| TITLE                                       |   | ☐ DEL                                     | ETE 3.11      | ITTLE            |                  | ☐ Changi   | e                             |  |
| NAME -                                      | •   | •   | 3.21          | NAME             | ~                |  |                               |  |
| STREET ADDRESS                              |   |   |               | STREET<br>CITY-S | T ADDRESS        | •  |                               |  |
| CITY-ST-ZIP<br>TITLE                        |   | ☐ DEL                                     |               | TITLE            | 71-ZII           | Chang  | B Addition                    |  |
| NAME  |   | _   | 4.2           | NAME             |                  |  | }                             |  |
| STREET ADDRESS                              |   |   | 4.3 \$        | STREET           | TADDRESS         |  | 4                             |  |
| CITY-ST-ZIP                                 |   |   | 4.4 (         | CITY-SI          | T-ZIP            |  |                               |  |
| TITLE                                       |   | ☐ DEL                                     | ETE 5.1 1     | ITLE             |                  | ☐ Change   | e Addition                    |  |
| NAME  |   |   | 521           | NAME             |                  |  |                               |  |
| STREET ADDRESS                              |   |   | 5.3 \$        | STREET           | ADDRESS          |  |                               |  |
| CITY-ST-ZIP                                 |   |   |               | CITY-ST          | T- ZIP           |  |                               |  |
| TITLE                                       |   | ☐ DEL                                     |               | TITLE            |                  | ☐ Chang  | e 📑 Addition                  |  |
| NAME  |   |   | 1             | VAME             |                  |  |                               |  |
| STREET ADDRESS                              |   |   | 6.3 \$        | STREET           | TADDRESS         |  |                               |  |

CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP

SIGNATURA