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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

## DOCUMENT # **J46708**

1. Corporation Name

RICK BE	NNETT, INC.						
Principal Place of Business Mailing Address 1717 SW 1ST WAY STE 27 CORAL SPRINGS FL 33065 DEERFIELD BEACH FL 33441 US					DO NOT WRITE IN T		
ชร์	·				3. Date Incorporated or Qualifed 12/11/1986		
2. Principal Place of Business 11 6601 LYONS ROAD 2a. Mailing Address 2b. Mailing Address 2c. Mailing Addr					4. FEI Number 59-2751544	<u> </u>	plied For t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 A	
City & State	NUT CREEK	City & State		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> Added t		
Zip 330	73 Country BROWARD	Zip <b>29</b>	Countr 30	у	This corporation owes the current year     Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent	
BENNETT, RICK A. 4000 NW 108TH DRIVE CORAL SPRINGS FL 33065			8		t Address (P.O. Box Number is Not Acceptable)		
			8:				
			84	\$ City		85 Zip (	Code
agent. I a SIGNATURE	m familiar with, and accept the obligate Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered Age	s. 	tion's board of directors. I hereby accept the appropriate the appropriate the property of the		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE NAME	PD Bennett, Rick A.	☐ DELETE	1.1 TITLE 1.2 NAME			☐ Criange	
STREET ADDRESS CITY-ST-ZIP	4000 N.W. 108TH DRIVE CORAL SPRINGS FL		1.3 STREI 1.4 CITY-	ET ADDRESS ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME			2.2 NAME		•		
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME		والمادي المستعلق	☐ Change	Addition
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP		Finere	3.4. CITY-			Change	Addition
TITLE		☐ DELETÉ	4.1 TITLE	1		one.ige	
NAME			4. 2 NAME	į			
STREET ADDRESS			4.4 CITY-	ET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		1.000	Change	Addition
NAME			5.2 NAME			-	
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STRE	ET ADDRESS			]

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FRO Rick A. Bennett 1-8-99