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PROFIT CORPORATION ANNUAL REPORT 1999

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J98681

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 90027 023 ***150.00

CHOICE	PROPERTIES, II	NC.								
Principal Place	e of Business	М	lailing Address				AANAN MARIN KURUN KURUN KARAN K	ELEK ILBI DIBIR I		iāli ātāti lasi
Principal Place of Business Mailing Address 777 DELTONA BLVD. SUITE 7 DELTONA FL 32725 DELTONA FL 32725						DO NOT WRITE IN THIS SPACE				
US						3. Date Inc	orporated or Qualifed	I		
						10/26/	1987			
2. Principal Pi	lace of Business		. Mailing Address	_		4. FEI Num			App	olied For
21		26				59-288	0167		Not	Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.			5. Certifcat	e of Status Desired		\$8.75 A Fee Rec	ľ
City & State	te		City & State			6. Election	Campaign Financing]	\$5.00	May Be
23		28				J.	nd Contribution		Added to	
Zip	Coun	try	Zip	Country	/	8. This corp	poration owes the cu	rrent year In	tangible	1
24	25	29		30		Persona	Property Tax.		☐ Yes	□No
.= -1		ress of Current Regis	stered Agent			10. Name a	nd Address of New	Registered	Agent	
COD	NACCO EVA			81	Name	MARIA	SARA	CO		
	RMOSO, EVA	7		82	Street A	ddress (P.O. Box N	lumber is Not Accep			
	DELTONA BLVD. #	1			58€	Bern	<u>iasek D</u>	<u> </u>		{
DEL	TONA FL 32725			83				, F. (1° -	7. 7.	
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office or n agent. I a SIGNATURE	to the provisions of Se registered agent, or bo am familia, with, and ac Signature, typed or printed na	cept the obligations of	f, Section 607.0505, Fi	O⊓da Statute:	S.	MAR -	ta Sar	A CO	2/17/9	99
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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.

64 CITY-ST-ZIP

SIGNATURE: