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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

i. Corporation	MENT # K34892 NAMARA, INC.			1.10010111.0000.1111.0001.1011.0	andri didili bralı Giğli Bralı dibli 1881
Principal Place	of Business	Mailing Address	<u> </u>	I (BBISTIT ORS THEIR DOUGLES THEIR	6144 41611 41411 81811 A1411 A1411 A1411
4747 PROGRESS	S AVE	4747 PROGRESS AVE.			
NAPLES FL 33942-7032 NAPLES FL 33942-7032				DO NOT WRITE IN	THIS SPACE
US		US		3. Date Incorporated or Qualifed	TIMO OF FIGE
				09/28/1988	
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	000 0, 200,1000	26		65-0074857	Not Applicable
Suite, Apt. 7	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27	- 4	5. Certificate of Status Desired	Fee Required
City & State	e	City & State	•	6. Election Campaign Financing	\$5.00 May Be
23	·	28	<u></u>	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye	
24	25		30	Personal Property Tax.	Yes No
<u> </u>	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regist	tereu Agent
SCH	ECHTER, JOEL H ESQ.			Edge ARO M	91/HM/HM
6620 GEORGE WASHINGTON WAY			82 Street Add	ress (P.O. Box Number is Not Acceptable)	e 4/6
3001 TAMIAMI TRAIL NORTH			83	141 1106-1600.	2 1/4 6
	LES FL 34108				
			84 City	XIANIES	FL 85 Zip Code
44 D	to the amplicance of Sections 607 0502	and 607 1508 Florida Statutes	s the above-named corr	poration submits this statement for the purpo	se of changing its registered
	to the provisions or sections our losez				
office or re	egistered agent or both in the State o	f Florida. Such change was auf	thorized by the corporati	ion's board of directors. I hereby accept the	appointment as registered
office or re	egistered agent, or both, in the State o m familiar with and accept the obligati	f Florida. Such change was auf	thorized by the corporati	ion's board of directors. Thereby accept the	appointment as registered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State o m familiar with and accept the obligation	f Florida. Such change was autons of Section 607.0505, Florida	thorized by the corporati da Statutes.	ion's board of directors. Thereby accept the	appointment as registered
office or re agent. I ar SIGNATURE	egistered agent or both in the State o	f Florida. Such change was autons of Section 607.0505, Floridad title if applicable. (NOTE: F	thorized by the corporati	ion's board of directors. Thereby accept the	-3/-99
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State o m familiar with and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND	f Florida. Such change was autons of Section 607.0505, Floridad title if applicable. (NOTE: F	thorized by the corporati da Statutes. Registered Agent signature require	on's board or directors. Thereby accept the	-3/-99
office or reagent. I are SIGNATURE	egistered agent, or both, in the State of m familiar with and accept the obligation of the property of printed name of registered agent of the property of the	f Florida. Such change was autons of Section 607.0505, Floridade de little if applicable. (NOTE: F.) D DIRECTORS	thorized by the corporation of t	on's board or directors. Thereby accept the	ATE RS AND DIRECTORS IN 12
office or reagent. I are SIGNATURE 12.	egistered agent, or both, in the State o m familiar with and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND	f Florida. Such change was autons of Section 607,0505, Floridade did the rappicable. (NOTE: FO DIRECTORS	Registered Agent signature require 13. 1.1 TITLE	on's board or directors. Thereby accept the	ATE RS AND DIRECTORS IN 12
office or reagent. I an SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State o m familiar with and accept the obligation Signature, typed or printed name of registered agent OFFICERS AND PD MCNAMARA, EDWARD P 6620 GEORGE WASHINGTON V	f Florida. Such change was autons of Section 607,0505, Floridade did the rappicable. (NOTE: FO DIRECTORS	thonzed by the corporation da Statutes. Registered Agent signature require 13. 1.1 TITLE 12 NAME	on's board or directors. Thereby accept the	ATE RS AND DIRECTORS IN 12
office or reagent. I are SIGNATURE 12. TITLE NAME	egistered agent, or both, in the State of m familiar with and acceptable obligation of the state	f Florida. Such change was autons of Section 607,0505, Floridade did the rappicable. (NOTE: FO DIRECTORS	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	on's board or directors. Thereby accept the	ATE RS AND DIRECTORS IN 12
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office or reagent. I an SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of m familiar with and accept the obligation of the college of the colle	ons of Section 607,0505, Floridadous of Section 607,0505, Floridadous of Applicable. (NOTE: FOR DIRECTORS)	Registered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	on's board or directors. Thereby accept the	RS AND DIRECTORS IN 12 Change Addition
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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 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS