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

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90072 038 ***150.00

1. Corporation	MENT # K36142 INT CORPORATION	2						
Principal Place	of Business	Mailing Address					 	HOLC FIELL LOOF
278-3 FEDERAL								
-DEERFIELD-BEACH-FL-99441 DEERFIELD-BEACH-FL-33441						DO MOT MIDITE IN	THIS SDACE	
		C/U WEISS	7: 11	te a		DO NOT WRITE IN 3. Date Incorporated or Qualifed	THIS SPACE	
		11549 ALANA BOYNTON BÉRRA	6 G	? ≥ 4 2	29	10/04/1988		{
2 Principal P	lace of Business	2a. Mailing Address	-, 76	,,,,		4. FEI Number	AD	plied For
21 26						65-0075958		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						_	\$8.75	Additional
22 27						5. Certificate of Status Desired	Fee Re	quired
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
23 28						Trust Fund Contribution	Added t	o Fees
Zip				Country		This corporation owes the current year.		√
24	25	29	30			Personal Property Tax.	L Yes	<u> </u>
	9. Name and Address of Currer	nt Registered Agent		31 Name		10. Name and Address of New Regis	tered Agent	
WEI	SE KLIDT				Ki	NE155 <u> </u>		
WEISS, KURT 276 S FEDERAL HWY				Street	Addres	ss (P.O. Box Number is Not Acceptable) A LANA TELETER		
				// <i>5 (</i>	44	ALANA JURET		-
	, lead be with a do			~				
			[8	Sity Boy	- 	y BERL	FL 85 Zip 3	Code
44 Dugguant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statut	es the abo	wo named	COLDOL	ation submits this statement for the num	ose of changing its	registered
office or r	edistered agent or both, in the State	of Florida, Such change was a	iuuiorizea i	ov ine corbi	oration	's board of directors. I hereby accept the	appointment as re-	gistered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Fig	rida Statut	es.			3/1/99	İ
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Ret				gent signature r	required w	when reinstating)	ATE 7.7	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	D	DELETE	1.1 TITL	E			Change	☐ Addition {
NAME	Weiss, Kurt		1.2 NAM	E			,	
STREET ADDRESS	276-S-FEDERAL HWY		13 STR	13 STREET ADDRESS		49 ALANA TERRACE OYNTON BEACH, FL	324/32	
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CITY	1.4 CITY-ST-ZIP		CYNTON BEACH, FL	3343/	
TITLE	□ OELETE		2.1 TITL	2.1 TITLE			Change	Addition)
NAME			2.2 NAM	E				
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NAME			3.2 NAM					
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TITLE	ال " لر		5.2 NAN				<u> </u>	_
NAME STREET ADDRESS				EET ADDRESS		·		}
CITY-ST-ZIP	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	/		-ST-ZIP				
TITLE	U /	☐ DELETE	6.1 TITL		t		☐ Change	Addition
NAME		_	6.2 NAN	E		• •	•	• •
STREET ADDRESS			6.3 STR	EET ADDRESS	1			
STREET ADDRESS			64 CIT	4.ST.7tP				

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3/1/99 (561/74-1/3)