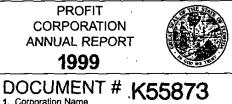
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 23, 1999 8:00 am Secretary of State 04-23-1999 90127 048 \*\*\*150.00

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Principal Plac		Mailing Address								
* RANDOLPH		% RANDOLPH C. GARNER								
1273 S. MILITARY TRAIL  W. PALM BEACH FL 33415  W. PALM BEACH FL 33415  W. PALM BEACH FL 33415						DO NOT WRITE IN THIS SPACE				
II. I FICHI DENC	, ·	W. I NOW DENOTITE OFFIC				3. Date Incorporated or Qualifed				]
						01/05/1989				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		App	lied For	1
1		26				65-0188523	·			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8	.75 A	dditional	1
2		27				5. Certifcate of Status Desired	F	ee Rec	uired	1
City & State		- City & State				6. Election Campaign Financing		5:00 i	Mav Be	7=
3	•	28				Trust Fund Contribution		dded to		
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year	r Intangible	9		7
4	25	29	30			Personal Property Tax.	☐Ye	s l	□No	
·	9. Name and Address of Current					10. Name and Address of New Registe	red Agent			]
·			_ 7	81 N	lame					j
GAR	iner, randolph C.		Ì	82 5	Stract Addres	one (B.O. Boy Number in Not Acceptable)				-
1273 S. MILITARY TRAIL				02 3	oueer Addre	Address (P.O. Box Number is Not Acceptable)				l
W. F	PALM BEACH FL 33415		j	83						1
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			- {	84 (	City	1	FL  85	Zip C	ode	1
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,				the above-named c		ration submits this statement for the purpos	e of chang	ing its r	egistered	1
office or r	registered agent, or both, in the State o	of Florida. Such change was aut	horized	by the	corporation	n's board of directors. I hereby accept the a	ppointment	t as reg	istered	{
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flone	da Stati	ites.						1
SIGNATURE	Signature, typed or printed name of registered agen	and title if anglicable (NOTE: F	Registered	Agent sig	mature required	when reinstating) DAT	<u> </u>			١.
12.	<del></del>	77		<u> </u>	<del></del>					ኅ '
	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	S AND DIR	ECTO	RS IN 12 🔭	.   :
TITLE	<del>,</del>	D DIRECTORS	13.	 LE		ADDITIONS/CHANGES TO OFFICERS	S AND DIR		RS IN 12 Addition	} }
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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 suppliemental 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: