PROFIT CORPORATION ANNUAL REPORT

1999

1, Corporation Name

DOCUMENT # K61588



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State • DIVISION OF CORPORATIONS

May 04, 1999 8:00 am Secretary of State

05-04-1999 90007 002 ***150.00

r. n. u.,	H4C		•						
D () - 1 D		14-	iling Address					i 8 1016 01611 91016 61	
Principal Place									
			FRANK LEGOW	7 NE 15TH COURT					
MIAMI FL 33179			MIAM! FL 33179				DO NOT WRITE IN THIS SPACE		
	•						3. Date Incorporated or Qualifed		
							01/27/1989		
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number	Apr	plied For
21		26	_				65-0096895	Not	Applicable
Suite, Apt.	#, etc.	— — — — — — — — — — — — — — — — — — —	Suite, Apt. #, etc.					\$8.75 A	dditional
22		27					5. Certificate of Status Desired	Fee Re	quired
City & State	9	1 1	City & State	-			6. Election Campaign Financing	\$5.00	May Be
23		28	•				Trust Fund Contribution	Added to	
Zip	Country		Zip	Cou	ntry		8. This corporation owes the current year	intangible	
24	25	29		30			Personal Property Tax.	☐ Yes	ŪMo
	g. Name and Address of Current		ered Agent				10. Name and Address of New Registere	d Agent	
					81	Name		•	
	OW, FRANK				00	C4 A 444-	ress (P.O. Box Number is Not Acceptable)		
20377 NE 15TH CT				82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
MIAM! FL 33179				ŀ	83				
	•						····		
					84	City	F	85 Zip C	Code
44 Purcuant	to the provisions of Sections 607.0503	and 60	7 1508 Florida Statute	s the at	ove-	-named corp	oration submits this statement for the purpose	of changing its	registered
office or r	egistered agent or both, in the State (of Florida	a. Such change was au	ithorizea	DV t	ine corporatio	on's board of directors. I hereby accept the app	ointment as rec	gistered
agent. I a	m familiar with, and accept the obligat	ions of,	Section 607.0505, Flor	ida Statu	ites.		- 11/2	In all	
SIGNATURE			K	LA		L. D. Good	d When reinstating)	10/	4
42	Signature, typed or printed name of registered agen OFFICERS AN			13.	- you	algitations rodonor	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	D		DELETE	1.1 TIT	LE		ADDITIONAL TO CONTRACT OF CONT	☐ Change	☐ Addition
NAME	LEGOW, FRANK			1.2 NA					-
	20377 NE 15TH CT				ADDRESS				
STREET ADDRESS				1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL □ DELETE		_	1.4 CITY-ST-ZIP 2.1 TITLE		·	Change	Addition	
TITLE	_			1					
NAME	LEGOW, ERIC			2.2 NA					
STREET ADDRESS	20377 NE 15TH CT		•		ADDRESS				
CITY-ST-ZIP	MIAMI FL		2. 4 CI		T-ZIP		Change	Addition	
TITLE	D		☐ DELETE	3.1 TIT			•	Change	
NAME	O'NEILL, GEORGE			3.2 NA	ME	Į			
STREET ADDRESS				3.3 ST	REET.	ADDRESS		•	
CITY-ST-ZIP	MIAMI.FL			3.4. CI	TY-ST	T-ZIP			
TITLE	•		☐ DELETE	4.1 TIT	ΓLE]		☐ Change	☐ Addition
NAME				4. 2 N	AME	1			
STREET ADDRESS				4.3 ST	REET	ADDRESS			
CITY-ST-ZIP	·			4.4 CI	TY-ST	-ZIP			
TITLE			☐ DELETE	5.1 TIT	ΓLE			☐ Change	Addition
NAME				5.2 NA	ME		·		
STREET ADDRESS	•			5.3 ST	REET	ADDRESS			
CITY-ST-ZIP	{			5.4 CI	TY-ST	-ZIP			
TITE			□ DELETE	6.1 TIT	ΠÆ		1217	☐ Change	Addition

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 1

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE