FÍLE 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

OCUMENT # K69297

Frederick S. Weinstein, C.P.A., P.A.

Feb 09, 1999 8:00 am Secretary of State

02-09-1999 90021 029 ***150.00



						HILL BURN BURN BURN HER
Principal Place of Business Mailing Address					s indiabili sid dilia india libin lalis lans atali atali A	1811 B1811 81811 B1811 1881
4875N FEDE	RAL HWY 4TH FLOOR	4875N FEDERAL HWY 4TH	FLOOR	,		
FT. LAUDERDALE FL 33308-1610 FT. LAUDERDALE FL 33308-1			-1610	•		•
					DO NOT WRITE IN THIS SPA	CE
. į.		•			3. Date Incorporated or Qualifed	
					02/24/1989	
2. Principal	I Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0182948	Not Applicable
Suite, A	pt. #, etc.	Suite, Apt. #, etc.		•	5. Certificate of Status Desired 1	8.75 Additional
22		27		1	5. Solutions of Status Section	Fee Required
rini City & S	tate	City & State			6. Election Campaign Financing	5.00 May Be
23	28			l	Trust Fund Contribution	Added to Fees
Zip .	Country	Zip	Country	ý	8. This corporation owes the current year Intangit	ole :
24	25		30	1	Personal Property Tax. '	
inned.	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered Age	nt
			81	Name ·	The state of the s	1
WEINSTEIN, FREDERICK S. 28888 NW 30TH ST. BOCA RATON FL 33431			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
			") Olicol Add	1033 (1,10). DOX (Validadia)	
			83	1		o kapanesian
					1976年1987年,曾经的特殊公司	基位的翻译器 [1]
d			84	City	E 1 8:	Zip Code
11 Pursua	nt to the provisions of Sections 607.05	502 and 607.1508. Florida Statute	s, the abov	e-named corp	poration submits this statement for the purpose of chan	ging its registered
office o	r registered agent, or both, in the State	e of Florida. Such change was au	thorized by	the corporation	poration submits this statement for the purpose of char on's board of directors. I hereby accept the appointme	nt as registered
agent.	am familiar with, and accept the oblig	gations of, Section 607.0505, Fion	ida Statutes	5. 		
SIGNATUR		and and title if applicable. /NOTE:	Decistored Acro	ot cianature require	ad when reinstating) \	<u> </u>
; Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re 12. OFFICERS AND DIRECTORS			13.	in alguatore require	ADDITIONS/CHANGES TO OFFICERS AND DI	DECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	i I		Change Addition
NAME	WEINSTEIN, FREDERICK S.		1.2 NAME			
5 7 8 1 9 1				T ADDRESS		
STREET ADDRES	FT. LAUDERDALE FL				45	
COTY-ST-ZIP	FI. LAUDENDALE FL	☐ DELETE	1.4 CITY-S 2.1 TITLE	1	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	Change Addition
	1			,		Silailige Madison
MANE			2.2 NAME	İ	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRES	SS .		2.3 STREE	T ADDRESS	• .	ì
CTY-ST-ZIP			2. 4 CITY-	ST-ZIP	ale flat a la la	· · · · · · · · · · · · · · · · · · ·
	449.04	☐ DELETE	3.1 TITLE			Change
Mr.			3.2 NAME			-{
STREET ADDRES	ss		3.3 STREE	TADDRESS	The second of th	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CHY ST-ZIP	``		3.4. C/TY-5	ST-ZIP		为《清澈特集》
mile 1		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			i
STREET ADDRES	ss					
CITY-ST-ZIP			4.3 STREE	I ADDRESS		
TITLE				I		·
		☐ DELETE	4.3 STREE 4.4 CITY-S 5.1 TITLE	T-ZIP		Change
NAME		. DELETE	4.4 CITY-S	T-ZIP	·,	Change
	as a second	. DELETE	4.4 CITY-S 5.1 TITLE 5.2 NAME	T-ZIP		Change Addition
NAME STREET ADDRESS	SS T	. DELETE	4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE	T-ZIP	·,	Change Addition
NAME STREET ADDRESS CITY: ST-ZIP	SS	. DELETE	4.4 CITY-S 5.1 TITLE 5.2 NAME	T-ZIP		
NAME STREET ADDRES CITY: ST-ZIP TITLE	SS		5.4 CITY-S 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE	T-ZIP		Change Addition
NAME STREET ADDRES CITY: ST-ZIP TITLE NAME			4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS		
NAME STREET ADDRES CITY: ST-ZIP TITLE			4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	T ADDRESS T ADDRESS		

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.

GNATURE: