Applied For

Fee Required

Not Applicable \$8.75 Additional

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

PROFIT CORPORATION ANNUAL REPORT

1999

GYLAND, STEVE

4110 PGA BOULEVARD

PALM BEACH GARDENS FL 33410



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90025 025 ***150.00

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\Box	OCUMENT	#	K7	74!	51
1	Cornoration Name				•

128 PGA BLVD	4128 PGA BLVD			
PALM BEACH GARDENS FL 33410	4128 PGA BLVD PALM BEACH GARDENS FL 33410			
2. Principal Place of Business	2a. Mailing Address			
a '	26			
1 E 4				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
Suite, Apt. #, etc.				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
Suite, Apt. #, etc. 22 City & State	Suite, Apt. #, etc.			
22	Suite, Apt. #, etc. 27 City & State			

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

04/04/1989 4. FEI Number

65-0099289

5. Certifcate of Status Desired

	6.	Election Campaign Financing Trust'Fund Contribution			May Be to Fees	تبقت.
	8.	This corporation owes the current year log Personal Property Tax.	tangible		□No	
	10.	Name and Address of New Registered	Agent			
Addres	ss (F	P.O. Box Number is Not Acceptable)				
			loel	Zin (Codo	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

81 Name

82 Street

84 City

agona	(4) (1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4			,		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	/NOTE: Pa	gistered Agent signature re	equired when rejectation)	DATE	
	OFFICERS AND DIRECTORS	(INC) E. NO	13.	ADDITIONS/CHANGES TO OF		RS IN 12
TITLE		DELETE	1.1 TITLE	ADDITIONS/CHANGES TO CI	Change	Addition
NAME	GYLAND, STEVE		1.2 NAME			_
STREET ADDRESS	4110 PGA BLVD.		1.3 STREET ADDRESS		•	1
	PALM BCH. GARDENS FL		1.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	2.1 TITLE		☐ Change	Addition
NAME	GYLAND, STEVE		2.2 NAME	•	,	
STREET ADDRESS	4444 BOL BUID		2.3 STREET ADDRESS			
CITY-ST-ZIP	PALM BCH. GARDENS FL.		2.4 CITY-ST-ZIP	,		ļ
TITLE	The second secon	OELETE	3.1 TILE		Change	(Addition :
NAME			3.2 NAME		•	
STREET ADDRESS	**		3.3 STREET ADDRESS	•		İ
CITY-ST-ZIP			3.4. CITY+ST-ZIP			
TILE		DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4.2 NAME			Ì
STREET ADDRESS			4.3 STREET ADDRESS			Ì
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	•	☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME		• •	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE	•	☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME	·		
STREET ADDRESS			6.3 STREET ADDRESS	•		
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filling 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 five 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 employered 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: 2