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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27, 1999 8:00am

Secretary of State

TO REPORT TO A CONTROL OF THE REPORT OF THE PROPERTY OF THE PR

01-27-1999 90045 039 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K77699

EWART CHAIN, INC.

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|---|--|-------------------------------------|----------------------|--------------------|------------------|---|-----------------------|---------------------------------------|----------------|-----|
| Principal Place of Business Mailing, Address | | | | | | 1 | (B (B)) B1011 4131 | | 11, 6,6,1 ,66, | |
| 1061 WEST OAK SUITE 123 | • | 1061 WEST OAKLAND BLVD SUITE 123 | SUITE 123 | | | DO NOT WRITE IN THIS SPACE | | | | |
| FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 33311 US | | | | | | 3. Date Incorporated or Qualifed | | | | |
| US | | Uð | | | | 04/05/1989 | | | | |
| | | 2a. Mailing Address | | | | 4. FEI Number | | App | lied For | |
| ⊢ ' | lace of Business | | | | | 65-0115803 | | | Applicable | ä |
| 21 | | Suite, Apt. #, etc. | | | | 0070110000 | | \$8.75 AC | | 1 |
| Suite, Apt. #, etc. | | | 27 | | | 5. Certificate of Status Desired | | Fee Req | | _ |
| City & State | | City & State | | | | 6. Election Campaign Financing | | \$5.00 N | May Be | |
| ├ ── | | 28 | | | | Trust Fund Contribution | | Added to | , , | |
| Zip | Country | Zip Country | | | | 8. This corporation owes the current year Intangible | | | | |
| 24 | 25 | 29 | 0 | | | Personal Property Tax. | | ☐ Yes [| □No | |
| 241 | 9. Name and Address of Current | <u> </u> | - | 1 | | 10. Name and Address of New F | legistered A | gent | - | |
| | n. 11000 | <u> </u> | | 81 | Name | | | | | |
| ,,,,, MOS | ELEY, MALCOLM H | | 82 Street | | | ss (P.O. Box Number is Not Accepta | able) | | | |
| 1824 | NW 48TH TERRACE | | | | - Cuock Addition | | <u> </u> | · · · · · · · · · · · · · · · · · · · | | |
| COC | CONUT CREEK FL 33063 | | - | 83 | | | | | | |
| | • | | | 84 | City | र प्रति के ते स्तिकारण गर्मा के से प्रति कार्या है। राज्य क्षित्र के गर्मा के प्रतिकारण कार्या कार्या कार्या | A 120 0 30 30 3 | 85 Zip C | ode | |
| | 1 | | | | | | <u> </u> | | | |
| 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 300 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 300 Ragent 21 am familiar with, and accept the obligations of Section 607.0505; Florida Statutes. | | | | | | | | | | |
| | Signature, typed or printed name of registered agent | and doo is opposition. | 3 ddo ii oppiiidatei | | | when reinstating) (1000) ADDITIONS/CHANGES TO OF | | DIRECTO | RS IN 12 | 8 |
| 12. | OFFICERS AND | | 13. | | - - | | - IOCKS AIRE | ☐ Change | Addition | |
| TITLE | M | ☐ DELETE | 1.17 | | . 1 | 선물 전환 전환 및 | | | , | |
| NAME | MOSELEY, MALCOLM | | 1.2 NAME | | | | | | | 1 8 |
| STREET ADDRESS | 3900 NW 79TH AVE, STE 324 | | 1.3 5 | STREET | ADDRESS | | • | | j | |
| CITY-ST-ZIP | MIAMI FL | | | CITY-ST- | ZIP | | | ☐ Change | · Addition | 1 8 |
| TITLE | | ☐ DELETE | 2.1 T | TITLE | · | | | □ Citalige | L Addition | |
| NAME | | | 2.2 NAME | | | | | | 1 | 1 |
| STREET ADDRESS | | | 2.3 ST | | ADDRESS | | | | | İ |
| CITY-ST-ZIP | | | | CITY-ST | -ZIP | | | | | ł |
| TITLE | | ☐ DELETE | 3.1 T | LITTLE | | | | Change | ☐ Addition | |
| NAME | EFER CHARDEN A | | 3.2 N | VAME | | | | | | |
| STREET ADDRESS | -PARSIN ICIDICA | | 3.3 5 | STREET A | ADDRESS | 1. 海绵线 4.7 计不可谓负制的 第 | enity jager | 机高霜 制料等 | astracta. | |
| CITY-ST-ZIP | | | 3.4. 0 | | -ZIP | 1. 1840年 - 1917年 - 1841年 - 18 | | | 湖南铁铁 | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | | 4. 1. 15. 2. 2. 3. 4. | Change 3 | ্ 🕜 Addition | |
| NAME | | | 4.2 | 4, 2 NAME | | | | | ł | |
| STREET ADDRESS | with the same of t | | 4.3 5 | 4.3 STREET ADDRESS | | | | • . | | ł |
| attitude of the second | | | 4.4 (| | | · | | <u> </u> | | 1 |
| TITLE | | DELETE | _ | TITLE | <u> </u> | | | ☐ Change | ☐ Addition | l |
| | , | | 5.2 1 | | | | | | | l |
| NAME . | nnpres) | | 5.3 5 | 3 STREET ADDRESS | | | | • | | 1 |
| STREET ADDRESS | 86 | | 5.4 (| CITY-ST- | -ZIP | 350 3× 10 | | | |] : |
| CITY-ST-ZIP | 1 | | | | | | | | | 1 |

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. CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

□ DELETE

TITLE

NAME

STREET ADDRESS

MUDINE SPECIAL

3600 807 797 1 30.

M4 15.

☐ Change

☐ Addition