## FILE 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

## **DOCUMENT # K85668**

Country

9. Name and Address of Current Registered Agent

76 25

BROWN, JAY A.

3654 GEORGIA AVE. WEST PALM BCH. FL 33405

1. Corporation Name

TOO IAVIS DOLO INC

TOOJAT 3 FOLO, INC.	
_	
Principal Place of Business 5030 CHAMPION BLVD BOCA RATON FL 33411 US	Mailing Address
	3654 GEORGIA AVE. West Palm BCH. Fl 33405 US
2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	27
City & State	City & State

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29

DO NOT WRITE IN THIS SPACE

FILED

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90047 030 \*\*\*150.00

3. Date Incorporated or Qualifed 04/19/1989 4. FEI Number Applied For 50-232044 Not Applicable \$8.75 Additional Fee Required

\$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible 11No

Personal Property Tax. 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 85 Zip Code 84 City

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.

Country

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SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. [] Change Addition □ DELETE 1.1 TITLE TITLE BROWN, JAY A. 1.2 NAME NAME 3645 GEORGIA AVE. 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BCH. FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 2.1 TITLE KORENBAUM, WILLIAM D 2.2 NAME NAME **3654 GEORGIA AVENUE** 2.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33405 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE ☐ Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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.

CR2E034 (11/98)