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Feb 09, 1999 8:00am

Secretary of State 02-09-1999 90016 009 \*\*\*150.00

## 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 # L03175

1. Corporation Name

FENDER MENDER, INC.									
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		·				(m. 4.)		Cil (1 a)( a l l f 1) (a) (a) (a)	
Principal Place of Business Mailing Address						· I seemen an ease hiles	11m21 10m01 M211 M1	DI4 BEBUT BEBUT BEBUT B	
5050 NW 12 AVE 5050 NW 12 AVE						-	-		
FT LAUDERDALE FL 33309 US FT LAUDERDALE FL 33309 US						DO NOT	WOITE IN T	UC COACE	
03						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
						07/18/1989	ameo		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		1 1	- U - 4 C
21 26						65-0139834		<u> </u>	plied For t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						1 00 0 109004		\$8.75	
22 27						5. Certificate of Status Desir	ed 🗆	ې Fee Re	
City & State City & State						6. Election Campaign Financing \$5:00 May Be			May Be
23	28					Trust Fund Contribution Added to Fees			o Fees
Zip	Country				,	8. This corporation owes the current year Intangible			
			30	,		Personal Property Tax.			□No
Name and Address of Current Registered Agent				81	Name	10. Name and Address of I	lew Register	ed Agent	
GOLDSTEIN, ALAN				01	Name				
5050 NW 12 AVE				82	Street Add	ress (P.O. Box Number is Not Ad	ceptable)		•
FT LAUDERDALE FL 33309						* * * *********************************	to party at an	<u> </u>	
				83					
form the second	ur.			84	City		. <b>म</b>	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the Statum familiar with and accept the obliging	502 and 607.1508, Florida S	tatutes, the a	bove	e-named corp	poration submits this statement for	r the purpose	of changing its	registered
agent. I a	im familiar with, and accept the oblig	ations of, Section 607.0505	, Florida Stat	⊔tes.		on's board of directors. Finereby :	accept the ap	pointment as reg	istered
SIGNATURE	Classical								
12.	Signature, typed or printed name of registered ag	IND DIRECTORS	NOTE: Registered	Agen	t signature require	d when reinstating)	DATE		
TITLE	PTD	DELETI		ne		ADDITIONS/CHANGES TO	OFFICERS	AND DIRECTOR	
NAME	GOLDSTEIN, ALAN		1.2 NA			5克特特别产品		Clange	☐ Addition
STREET ADDRESS	5050 NW 12 AVE		1		1000000				
CITY-ST-ZIP	FT LAUDERDALE FL			ree: TY-ST	ADDRESS		· 1 9 >		
TITLE		DELETE			- <u>-</u>		·	☐ Change	☐ Addition
NAME			2.2 NA		-				
STREET ADDRESS					ADDRESS	1		4	•
CITY-ST-ZIP			2. 4 CI				•		
TITLE		☐ DELETE			1-211			Change	Addition
NAME	The same of the sa		3.2 NA						
STREET ADDRESS	rational and the second				ADDRESS				
CITY-ST-ZIP	The second of th		3.4. CF				是这个人		ind i
TITLE		☐ DELETE				13 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15	78.5 \$ 1.56.5 \$2.56.5 \$ 1.56.5 \$ 28.6	☐ Change	Addition
NAME			4.2 NA					El Suango , s	()Output
STREET ADDRESS					ADDRESS		•		

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 suppliented 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

51 TILE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

9547720313

☐ Change

☐ Change

☐ Addition

☐ Addition