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

PROFIT
CORPORATION
ANNUAL REPORT

1999

POLK, RHONDA S 950 SE 12TH STRET HIALEAH FL 33010



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90061 001 ***150.00

DOCUMENT #	L1	8078	3
------------	----	------	---

1. Corporation Name

Principal Place of Business	Mailing Address	
950 SE 12 ST HIALEAH FL 3:010	950 SE 12 ST HIALEAH FL 33010	
		3.
2. Principal Flace of Business	2a. Mailing Address	4.
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5.
City & Sta e	City & State	6.
/	City & State 28	8.

|--|--|

Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable

\$8.75 Add tional

	DO NOT	WRITE	N IHIS	SPACE
Date Incorpora	ted or Qua	alifed		

untry		8. This corporation owes the current year is		—
		Personal Property Tax.	Yes	UNo
		10. Name and Address of New Registered	d Agent	
81	Name			
82	Street Add	ress (P.O. Box Number is Not Acceptable)		
83				
84	City	F	85 Z	ip Coce

09/25/1989 FEI Number

65-0145013

Certifcate of Status Desired

Election Campaign Financing

Trust Fund Contribution

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 recistered 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 aim familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

agent. ()	in tanimar trian, one des prints designative	•••				
SIGNATURE	Signature, typed or printed name of registered agent and to	tte if applicable. (NOTE:	Registered Agent signature re	equired when reinstating) DATE		
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	DPC	DELETE	1,1 TITLE	DP	XX Change	Addition
NAME	BATCHELOR, GEORGE E.		1.2 NAME	TIRRI, SR. ANTHONY C.		
STREET ADDRESS	950 S.E. 12TH ST.		1.3 STREET ADDRESS	950 SE 12TH STREET		
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-ST-ZIP	HIALEAH PL		
TITLE	D	DOELETE	2.1 TITLE	DS	Change	Addition
NAME	DOUST, RICHARD		2.2 NAME	TIRRI, JEAN M.		
STREET ADDRESS	950 S.E. 12TH ST.		2.3 STREET ADDRESS	950 SE 12TH STREET		
CITY-ST-ZIP	HIALEAH FL		2.4 CITY-ST-ZIP	HIALEAH FL		
TITLE	T	DELETE	3.1 TITLE	DТ	☐ *Change	Addition
NAME	HIGGINS, JOHN J.		3.2 NAME	EBERT, JOHN C.		
STREET ADDRESS	950 S.E. 12TH ST.		3 3 STREET ADDRESS	950 SE 12TH STREET		
CITY-ST-ZIP	HIALEAH FL		3.4, CITY-ST-ZIP	HIALEAH FL		F
TITLE	V	DELETE	4.1 TITLE	VP	Change	Addition
NAME	SIMKOVITZ, LEONARD		4. 2 NAME	TIRRI, JR. ANTHONY C.		
STREET ADDRESS	950 S.E. 12TH ST.		4.3 STREET ADDRESS	950 SE 12TH STREET		
CITY-ST-ZIP	HIALEAH FL		4.4 CITY-ST-ZIP	HIALEAH FL.		
TITLE	AS	DELETE	5.1 TITLE	AS	🔀 Change	Addition
NAME	DAWSON, HUMPHREY		52 NAME	POLK, RHONDA S.		
STREET ADDRESS	950 SE 12TH ST.	_	5.3 STREET ADDRESS	950 SE 12TH STREET		
CITY-ST-ZIP	HIALEAH FL		5.4 CITY-ST-ZIP			F
TITLE	₩P	□ Ø€LETE	6.1 TITLE	HIALEAH FL	Change	Addition
NAME	WALKER, RAYMOND S		6.2 NAME			
STREET ADDRESS	950 SE 12TH ST		6.3 STREET ADDRESS			
CITY OF 710	HIALEAH EL		6.4 CITY-ST-ZIP			

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 uncer 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.

SIGNATURE:

GIGNATULE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99 Date 305)889-6222

CR2E034 (11/98)