

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

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

04-15-1999 90159 024 ***150.00

DOCUMENT # L20141

1. Corporation Name
PARZYGNAT, INC.

Principal Place of Business
4153 S.W. 47TH AVE.
SUITE 129
DAVIE FL 33314-4042
US

Mailing Address
4153 S.W. 47TH AVE.
SUITE 129
DAVIE FL 33314-4042
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	09/29/1989
4. FEI Number	65-0146932
Applied For	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business	2a. Mailing Address
21 2460 N.W. 17th Lane	26 2460 N.W. 17th Lane
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
22 Suite #7	27 Suite #7
23 City & State	28 City & State
23 Pompano Beach, FL	28 Pompano Beach, FL
24 Zip	29 Zip
25 33064	30 33064
Country	Country
USA	USA

9. Name and Address of Current Registered Agent
LAWRENCE JR., PARZYGNAT
4153 SE 47TH AVENUE, SUITE 129
DAVIE FL 33314

81 Name	Kenneth F. Parzygnat
82 Street Address (P.O. Box Number is Not Acceptable)	2460 N.W. 17th Lane
83 Suite #7	
84 City	Pompano Beach, FL
85 Zip Code	33064

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.

SIGNATURE *Kenneth F. Parzygnat* Kenneth F. Parzygnat V/P 4/6/99
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VP
NAME	Lawrence Jr., Parzygnat
STREET ADDRESS	2460 N.W. 17th Lane, Suite #7
CITY-ST-ZIP	Pompano Beach, FL 33064
TITLE	PST
NAME	Kenneth F. Parzygnat
STREET ADDRESS	2460 NW 17th Lane #7
CITY-ST-ZIP	Pompano Beach, FL 33064
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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 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.

SIGNATURE: *Kenneth F. Parzygnat* Kenneth F. Parzygnat 4/6/99 854-922-8487
Signature and typed or printed name of signing officer or director Date Daytime Phone #

0159750

CR2E034 (11/98)