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## 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

## DOOLINAENE # 1

<ol> <li>Corporation</li> </ol>	VIENT # L27793 NOE, INC.							
Principal Place	e of Business	Maili	ng Address			I (BSICE)) Sid tratt teatt table telea trit aton at	}11 <b>4</b> 1811 61611	, 4(9): 4:411 (44)
1130 CLEVELAN	ID ST.	1130	CLEVELAND ST.					
SUITE 210		SUITE						
CLEARWATER FL 34615 CLEARWATER FL 34615						DO NOT WRITE IN THIS	SPACE	<del></del>
US		US				3. Date Incorporated or Qualifed 11/02/1989		
2. Principal P	ace of Business	2a. N	lailing Address	••••		4. FEI Number		Applied For
21		26			.,	59-3162048		lot Applicable
Suite, Apt.	#, etc.	L s	uite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27						Required
City & State	е	$\vdash$	City & State			6. Election Campaign Financing		May Be
23		28	:	Country		Trust Fund Contribution		to Fees
Zip	Country	_	ip	Country		8. This corporation owes the current year Inte	angible Yes	□No
24	25 25 25 25 25 25 25 25 25 25 25 25 25 2	29	30	01		Personal Property Tax.  10. Name and Address of New Registered A		
	9. Name and Address of Curren	it Kegistei	red Agent	81	Name	IV. Italia and Address of the Registeres	180111	
SING	ier, david dr.							
1130 CLEVELAND STREET				82	Street Add	dress (P.O. Box Number is Not Acceptable)		İ
SUITE 210				83				
CLEARWATER FL 34615								
				84	City	FL	85 Zip	Code
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered ager	of Florida. tions of, S	Such change was autrection 607.0505, Florid	orized by a Statutes.	the corporati	poration submits this statement for the purpose of cion's board of directors. I hereby accept the appoint	tment as r	egistered
12.	OFFICERS AN			13.	. aignature requi	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	ORS IN 12
TITLE	ST		DELETE	1.1 TITLE			☐ Change	
NAME	VENEGAS, DIANA			1.2 NAME				}
STREET ADDRESS	1331 ENCINITAS BLVD #29			1.3 STREET	ADDRESS			Ì
CITY-ST-ZIP	ENCINITAS CA			1.4 CITY-ST				
TITLE	D		☐ DELETE	2.1 TITLE	-		Change	Addition }
NAME	SINGER, DAVID			2.2 NAME				l
STREET ADDRESS	1130 CLEVELAND STREET			2.3 STREET	ADORESS			İ
CITY-ST-ZIP	CLEARWATER FL			2. 4 CITY-S	- 1	•		
TITLE			☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME				3.2 NAME		•		
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. C/TY-S	ļ			
TITLE			☐ DELETE	4.1 TITLE		1.487	Change	e Addition
NAME				4. 2 NAME		•		
STREET ADDRESS	· 			4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-S1	4			
TITLE			☐ DELETE	5.1 TITLE		-	☐ Change	e Addition
NAME				5.2 NAME	•	,		ļ
STREET ADDRESS	1			53 STREET	ADDRESS			j
CITY-ST-ZIP	! 			5.4 CITY-S1	F-ZIP			
TITLE			☐ DELETE	6.1 TITLE			Change	Addition
				CONAME	ı			i

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 porporation 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 attackment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

> E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR