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 # **L27966**

1. Corporation Name

BUS STOP AT 22ND STREET, INC.

Mailing Address

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90251 024 ***300.00



Principal Place	e or business	Mailing Address				
2203 SOUTH FEDERAL HIGHWAY 2203 SOUTH FEDERAL HIGHW FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316			Υ			
				DO NOT WRITE IN THIS SI	PACE	
				3. Date Incorporated or Qualifed	,	
				11/07/1989		
	lace of Business	2a. Mailing Address		4. FEI Number .	Ap	plied For
	MIDDLE RIVER DR	10/6		65-0158029	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75	Additional
	420	27		5. Certificate of Status Desired	Fee Re	equired
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be
	AUDERDALE. FL	28		Trust Fund Contribution	Added	•
	Country		Country	8. This corporation owes the current year Intan-		
					igibie ∐Yes	□No
24 3330	<u> </u>	<u> </u>		10. Name and Address of New Registered Ag		
	9. Name and Address of Current I	registered Agent	81 Name	IV. Maille allo Addiess of Hew Registered Ag	,	 -
CLUT	LI VOLPHING B			THUR B. SMITH		
	TH, ARTHUR B.		82 Street	Address (P.O. Box Number is Not Acceptable)		11.0.0
	S. FEDERAL HIGHWAY		915	MIDDLE RIVER DRIVE	SuiTC	<u>420</u>
FOR	T LAUDERDALE FL 33316		83			
			BALCITY - BS Zip Code			
			84 City	LAUDERDALE FL		304
44 Durayant	to the provisions of Sections 607 0502	and 607.4508 Florida Statutes th	o shove named	corporation submits this statement for the purpose of ch	anging its	registered
office or r	egistered agent, or both, in the State of	Florid Such change was author	ized by the corpo	pration's board of directors. I hereby accept the appointr	ment as re	gistered
agent. I a	nt familiar with, and accept the obligation	ne of Section 607.0 505, Florida (Statutes.	1 /2 . 1	90	
SIGNATURE	(then o	orus		1/30/	<u> 7. 7. </u>	
	Signature, typed or printed name of registered agent a			aquired when reinstating) DATE	DIRECTO	DC IN 12
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
TITLE	PSD		1.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change	LJ AUGIIION
NAME	SMITH, ARTHUR B.	<u> </u>	12 NAME	ARTHUR B. SMITH	417.6	
STREET ADDRESS	2324 NE 20TH AVE.	į.	1.3 STREET ADDRESS	915 MIDDLE RIVER DRIVE.	420	
CITY-ST-ZIP	WILTON MANORS FL	.	1.4 CITY-ST-ZIP	PT. LAUDERDALE, FL 3330	04_	
TITLE	TD		2.1 TITLE		Change	☐ Addition
NAME	DUNN, GARY W.	•	2.2 NAME	GARY W. DUNN	_	
			2.3 STREET ADDRESS	917 N.E. 17TH TERR.		
STREET ADDRESS	3065 SW 45TH ST.				3300	L
CITY-ST-ZIP	FORT LAUDERDALE FL		2. 4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33		
TITLE			3.1 TITLE	ا ا	L_I Criange	- LI 70000011
NAME] :	3.2 NAME			
STREET ADDRESS] :	3 3 STREET ADDRESS			
CITY-ST-ZIP		.	3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition
NAME		.	4. 2 NAME			
			4.3 STREET ADDRESS	•		
STREET ADDRESS						
CITY-ST-ZIP		<u>_</u>	4.4 CITY-ST-ZIP 5.1 TITLE		Change	Addition
TITLE			5.2 NAME	'		٠
NAME						
STREET ADDRESS			5.3 STREET ADDRESS			
CiTY-ST-ZiP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
			6.4 CITY-ST-ZIP			
CITY-ST-ZIP	1	· ·	0.7 OH 1-01* AF			

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 suppliemental 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 dorporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the Block 12 or Block 13 if

SIGNATURE: