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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L41528

GARY MARKS, P.A.

FILED Jan 21, 1999 8:00am Secretary of State 01-21-1999 90019 038 ***150.00



	ce of Business	Mailing Address					
303 SW 6TH S	ST	303 SW 6TH ST					
	EST 6TH STREET	303 SOUTHWEST 6TH STRI	EET				
FT LAUDERDA	LE FL 33315	FT LAUDERDALE FL 33315			DO NOT WRITE I	IN THIS SPACE	
US		US ,			3. Date Incorporated or Qualifed		į
					01/08/1990		
2. Principal P	Place of Business	2a. Mailing Address			4, FEI Number	I A	pplied For
21	•	26			65-0165963	N	lot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22		27			5. Certifcate of Status Desired	Fee R	Required
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution		to Fees
	Country	- Zip	ÇoL	intry	8. This corporation owes the current		
24	25	29	30	•	Personal Property Tax.	Yes	□No
	9. Name and Address of Curren		301		10. Name and Address of New Regi		
The same of the sa				81 Name		<u> </u>	
MAF	RKS, GARY						
303	SOUTHWEST 6TH STREET			82 Street	Address (P.O. Box Number is Not Acceptable)	
FOR	RT LAUDERDALE FL			83		 	12.00
. 01.	Drobenovice re			83		4 , 1 4 ,	
•	•			84 City		85 Zip	Code
The Companies		nes ·				FL	
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1508, Florida Statute	s, the a	bove-named	corporation submits this statement for the pur	pose of changing it	s registered
onice or i	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida: Such change was au tions of Section 607:0505. Flori	itnorizec ida Stat	d by the corp utes.	oration's board of directors. I hereby accept th	e appointment as r	egistered
SIGNATURE		1:	-				į
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable (NOTE: I	B				
		it one has approved. (Ito I L.	Kegistered	Agent signature	required when reinstating) _ ' , \ ' ;	DATE	i i
12.		ID DIRECTORS	13.	Agent signature	ADDITIONS/CHANGES TO OFFICE		ORS IN 12
12.							
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14. I hereby certify that the information supplied with this filing indicated on this annual report or supplemental annual report of supplemental annual report of supplemental annual report of the corporation or the receiver of trust Block 12 or Block 13 if changed, or on an attachner with ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

CR2E034 (11/98)