PROFIT
CORPORATION
ANNUAL REPORT
1999

DOCUMENT # L41850



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90017 032 \*\*\*150.00

SSW, IN	C.									
Principal Place	e of Business	Mailing Address	-			1	I KOURIONI AN BINDE NABI (\$101 0		FOST   OLDI   010 H 01	gus 01011 (30)
8751 BROWARD BLVD 8751 BROWARD BLVD										
5TH FLOOR 5TH FLOOR							מא אחד ואים	тр ил тые	SPACE	
PLANTATION FL 33324 US PLANTATION FL 33324 US							DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
. 00						"	01/11/1990			
2 Dringing Di	loco of Pusinger	2a. Mailing Address				1	. FEI Number		Apr	lied For
¬ '```'							65-0164812			Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.									\$8.75 A	
22 27							. Certifcate of Status Desired		Fee Red	uired
City & State - City & State			-			6.	. Election Campaign Financing		\$5.00 1	May Be
23	28					Trust Fund Contribution		Added to		
Zip Country Zip			Country			8.	. This corporation owes the cur	ent year In	tangible	
24	25	29	30			╽_	Personal Property Tax.			□No
	9. Name and Address of Curren	t Registered Agent				10	. Name and Address of New	Registered	Agent	
WERNER, SETH 8751 BROWARD BLVD				81	Name					
				82	Street Addre	ess (l	P.O. Box Number is Not Accept	able)		
5TH FLOOR				83						
PLANTATION FL 33324				84	City				85 Zip C	ode
					- 1			FL		
office or n agent. I a	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with, and accept the obligat	of Florida. Such change was a	utnonzec	יעם נ	the corporation	n's b	oard of directors. I hereby acce	pt the appo	intment as reg	istered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	: Registered	Agen	nt signature required			DATE		
12.	OFFICERS AN		13.				ADDITIONS/CHANGES TO OF	FICERS A		
TITLE	PD	☐ DELETE	1.1 TI	TLE					☐ Change	☐ Addition
NAME	· · · · · · · · · · · · · · · · · · ·			1.2 NAME						- (
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TITLE	ST DELETE			TLE	Ì				□ Change	L Addison
NAME	ANDERSON, CHRIS.			AME			,			
STREET ADDRESS 8751 W BROWARD BLVD, 5TH FLOOR					TADDRESS					-
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NAME			3.2 N/							Į
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TITLE		[ ] 555515	6.2 N							_
NAME		•			T ADDRESS					
STREET ADDRESS	1		0.35	1.			•			

14. I hereby certify that the information supplied with this filing does not divalify 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 fue 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 his 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 appears, with proof of the corporation of

SIGNATURE:

Seth Werner

2/8/99

954-452-0000