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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L62863

DEGROOT INDUSTRIES INTERNATIONAL, INC.

· ·	•						44. Provincija i 4. dil 8 Vijeroj preji 10. dil 1	
Principal Place	of Business	Mailing A	Address		•	I (MB)(Alt ain atua itan italia aliab ilit ai	817 87871 678 21 878 11 8	1811 BIBIT 1881
18375 104 TERI BOCA RATON I US			18375 104TH TERRACE SOUTH BOCA RATON FL 33498 US			DO NOT WRITE IN T	HIS SPACE	
	.					3. Date incorporated or Qualifed		
						04/05/1990		
<u>⊢≕</u> ·	ace of Business	}ı	ng Address			4. FEI Number	ļ 	plied For
21		26				65-0188191		t Applicable
Suite, Apt.	#, etc.	27 Suite	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Re	
City & State	9	City	& State			6. Election Campaign Financing	\$5.00	May Be
23	<u> </u>	28				Trust Fund Contribution	Added to	o Fees
Zip 24	Country 25	Zip 29	30	Countr	у	This corporation owes the current year Personal Property Tax.	r Intangible ☐ Yes	No
						10. Name and Address of New Register	ed Agent	
				8	Name			
DEGROOT, RONALD JAN				82	Street A	Address (P.O. Box Number is Not Acceptable)		
18375 104TH TERRACE SOUTH					00017			
BOCA RATON FL 33498				8:	3			
•				84	City		85 Zip C	Code
					1		- L	
l office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Suc	ch change was auth	norized by	the corpo	corporation submits this statement for the purpos- ration's board of directors. I hereby accept the ap-	e of changing its oppointment as req	registered gistered
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg					ent signature re	quired when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	Р		☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	DE GROOT, RONALD J.			1.2 NAME		•		
STREET ADDRESS	18375 104TH TERRACE SOUT	Н		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-1	ST-ZIP			
TITLE	•		☐ DELETE	2.1 TITLE	1		☐ Change	Addition
NAME	•			2.2 NAME				
STREET ADDRESS			٠	-	TADORESS	المراب والمستعوب والمتحيل والمتحيل والمتحار والمتحار والمتحار والمتحار		
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP		Change	☐ Addition
TITLE			☐ DELETE	3.1 TITLE			☐ Citatige	- Augusti
NAME				3.2 NAME				
STREET ADDRESS	•				T ADDRESS			
CITY-ST-ZIP			☐ DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP		☐ Change	Addition
TITLE	•		☐ DELETE		.			
NAME				4. 2 NAME				
STREET ADDRESS					TADDRESS			
CITY-ST-ZIP			[] DELETE	4.4 CITY-	ST-ZIP		☐ Change	☐ Addition

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.

5.2 NAME

61 TTLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

Change

Addition