COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

GNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Sep 07, 1999 8:00 am Secretary of State 09-07-1999 90010 022 ***550.00

Corporatio	MENT # L88997	•						
AC-LEN	INVESTMENTS, INC.						012374 - 20010 - 55	
						_	L RECEIPEN BET HELD TENEN FRANK FRANK FRANK FRANK BURK BURK BURK BURK BURK BURK BURK BUR	
ncipal Plac	ce of Business	Ma	iling Address				(/02:10(t Sar /2:5) (2)(9 (5)(t) (10) didt didt 2(10) 2)(1) didt didt didt	
RIVIERA D			RIVIERA DR	201.40				
AL GABLES	S FL 33146	US	AL GABLES FL 3	X140			DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified	
							07/23/1990	
Principal Place of Business		— —	2a. Mailing Address				4. FEI Number Applied For	
S476A5 4400C Suite, Apt. #, etc.		26	26 SAR +> +7 Suite, Apt. #, etc.			65-0208912 Not Applicable \$8.75 Additional		
Suite, Apr. #, etc.		27	27 Suite, Apr. #, etc.				5. Certificate of Status Desired Fee Required	
City & Stat	te		City & State				6. Election Campaign Financing \$5.00 May Be	
·		28					Trust Fund Contribution Added to Fees	
Zip	Country		Zip		Coun	try	8. This corporation owes the current year	
	25	29		30	0		Intangible Personal Property. Yes No	
	9. Name and Address of Curre	ent Regist	ered Agent			B1 Name	10. Name and Address of New Registered Agent	
HIND	S, LEONARD S.				L			
6811	RIVIERA DR					Street Add	ess (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33144					-	83		
					L	74 00	85 Zip Code	
					84 City		85 Zip Code	
office or agent. I	registered agent, or both, in the Star am familiar with, and accept the obli	ite of Florid igations of,	a. Such change , section 607.050	was auti 05, Florid	the abo horized la Statu	ve-named corp by the corpora tes.	oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
office or agent. I	registered agent, or both, in the State am familiar with, and accept the oblining signature, typed or printed name of registered agent of the state	ite of Florid igations of, gent and title if	a. Such change, section 607,050 applicable.	was auti 05, Florid	the abo horized la Statu Registere	ve-named corp by the corpora tes.	oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
office or agent. I	registered agent, or both, in the State am familiar with, and accept the oblining signature, typed or printed name of registered agency of the CERS A	ite of Florid igations of, gent and title if	a. Such change, section 607,050 applicable.	was autr 35, Florid (NOTE:	the abordized fa Statu Registers 13.	ve-named corp by the corpora tes.	oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
office or agent. I :	registered agent, or both, in the State am familiar with, and accept the obligations of the state of the stat	ite of Florid igations of, gent and title if	a. Such change, section 607.050 applicable.	was autr 35, Florid (NOTE:	the abordized la Statu Registere 13. 1.1 TITL 1.2 NAM	ve-named corp by the corpora des.	oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
office or agent. I : :NATURE :: :ET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent the obligation of the state of registered agent the control of the state of the sta	ite of Florid igations of, gent and title if	a. Such change, section 607.050 applicable.	was autr 35, Florid (NOTE:	the abo horized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR	ve-named corp by the corpora fes. Id Agent signature re E E E E E E E E E E E E E	oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
office or agent. I is inature.	registered agent, or both, in the State am familiar with, and accept the obligations of the state of the stat	ite of Florid igations of, gent and title if	a. Such change, section 607.050 applicable.	was autr 05, Florid (NOTE:	the abo horized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR	ve-named corp by the corpora fes. Id Agent signature re E E E E E F F F F F F F F	oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
office or agent. I : :NATURE :: :ETADORESS ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent the obligation of the state of registered agent the control of the state of the sta	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable.	was autr 05, Florid (NOTE:	the abo horized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CIT	ve-named corp by the corpora tes. Id Agent signature re E HE EET ADDRESS (-ST-ZIP E	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered Applitions/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
office or agent. I: :NATURE :: :ETADDRESS ST-ZIP ::	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent the obligation of the state of registered agent the control of the state of the sta	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable.	was autr 05, Florid (NOTE:	the abonorized fa Statu Registers 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITT 2.1 TITL 2.2 NAA	ve-named corp by the corpora tes. Id Agent signature re E HE EET ADDRESS (-ST-ZIP E	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered Applitions/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
office or agent. I : :NATURE :: :ETADDRESS ST-ZIP :: :ETADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent the obligation of the state of registered agent the control of the state of the sta	ite of Florid igations of, gent and title if	a. Such change section 607.050 epplicable. CTORS DELE	Was autr D5, Florid (NOTE TE	the abo horized fa Statu 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CITT 2.4 CITT 2.4 CITT 3.0	ve-named corp by the corpora tes. Id Agent signature re E E EEET ADDRESS /-ST-ZIP E EEET ADDRESS /-ST-ZIP	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is invariant to the second secon	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent the obligation of the state of registered agent the control of the state of the sta	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable.	Was autr D5, Florid (NOTE TE	the abonorized fa Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITT 2.2 NAA 2.3 STR 2.4 CITT 3.1 TITL	ve-named corp by the corpora tes. Id Agent signature re E IE EEET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered Applitions/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
office or agent. I is invariant to the second secon	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent the obligation of the state of registered agent the control of the state of the sta	ite of Florid igations of, gent and title if	a. Such change section 607.050 epplicable. CTORS DELE	Was autr D5, Florid (NOTE TE	the abohorized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CITT 3.1 TITL 3.2 NAA	ve-named corp by the corpora tes. Id Agent signature re E IE EEET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E II EI II II II II II II I	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is in a contract of the con	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent the obligation of the state of registered agent the control of the state of the sta	ite of Florid igations of, gent and title if	a. Such change section 607.050 epplicable. CTORS DELE	Was autr D5, Florid (NOTE TE	the abohorized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CITT 3.1 TITL 3.2 NAA	ve-named corp by the corpora tes. Id Agent signature re E IE EEET ADDRESS /-ST-ZIP E EEET ADDRESS /-ST-ZIP E IE EEET ADDRESS	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is inactive to agent. I is inactive	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 epplicable. CTORS DELE	(NOTE	the abohorized la Statu Registers 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR	ve-named corp by the corpora tes. Id Agent signature re E IE EEET ADDRESS /-ST-ZIP E IE EET ADDRESS /-ST-ZIP E IE IE EET ADDRESS /-ST-ZIP E IE IE IE IE IE IE IE IE I	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is invariant to the second of the secon	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. CTORS DELE	(NOTE	the abohorized la Statu Registers 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CIT 2.2 NAA 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAA 3.3 STR 3.4 CIT 3.4 CIT	ve-named corp by the corpora tes. Id Agent signature re E IE EEET ADDRESS (-ST-ZIP E IE EEET ADDRESS (-ST-ZIP E IE EET ADDRESS (-ST-ZIP E IE EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E	oration submits this statement for the purpose of changing its registered titon's board of directors. I hereby accept the appointment as registered Addition Change	
office or agent. I is invariant to agent	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. CTORS DELE	(NOTE	the abohorized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CIT 2.1 TITL 2.3 STR 3.4 CIT 3.1 TITL 3.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAA	ve-named corp by the corpora tes. Id Agent signature re E IE EEET ADDRESS (-ST-ZIP E IE EEET ADDRESS (-ST-ZIP E IE EET ADDRESS (-ST-ZIP E IE EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E	oration submits this statement for the purpose of changing its registered titon's board of directors. I hereby accept the appointment as registered Addition Change	
office or agent. I is invariant to agent to age	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. CTORS DELE DELE	TE TE	the abohorized la Statu Registers 13. 1.1 TITL 1.2 NAA 1.3 STR 2.4 CIT 3.1 TITL 3.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CIT 4.4 CIT	ve-named corp by the corpora tes. Id Agent signature re E IE EET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is inactive to the second of the second	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. CTORS DELE	TE TE	the abohorized la Statu Registers 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CIT 2.1 TITL 2.3 STR 3.4 CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CIT 5.1 TITL 5.1 TITL	ve-named corp by the corpora tes. Id Agent signature re E IE EET ADDRESS /-ST-ZIP E EET ADDRESS	oration submits this statement for the purpose of changing its registered titon's board of directors. I hereby accept the appointment as registered Addition Change	
office or agent. I is inactive to the second of the second	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. CTORS DELE DELE	TE TE	the abohorized la Statu Registers 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITT 2.1 TITL 2.3 STR 2.4 CITT 3.1 TITL 4.2 NAM 4.3 STR 4.4 CITT 4.5 TITL 5.2 NAM	ve-named corp by the corpora tes. Id Agent signature re E EEE EET ADDRESS (-ST-ZIP E EEET ADDRESS	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is inature in the second of the second	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. CTORS DELE DELE	TE TE	the abohorized la Statu Registers 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITT 2.1 TITL 2.3 STR 2.4 CITT 3.1 TITL 4.2 NAM 4.3 STR 4.4 CITT 4.5 TITL 5.2 NAM	ve-named corp by the corpora tes. Id Agent signature re E EEE ADDRESS (-ST-ZIP E EEE ADDRESS	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is inature in the second of the second	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. CTORS DELE DELE	TE TE	the abohorized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAA 5.3 STR	ve-named corp by the corpora tes. Id Agent signature re E EEE ADDRESS (-ST-ZIP E	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered DATE	
office or agent. I is inature in the second of the second	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. TORS DELE DELE	TE TE	the abohorized la Statu Registere 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITT 2.1 TITL 2.3 STR 2.4 CITT 3.1 TITL 4.2 NAA 4.3 STR 4.4 CITT 5.1 TITL 5.2 NAA 5.3 STR 5.4 CITT 5.4 CITT 5.5 NAA 5.5 CITT 5.7 NAA	ve-named corp by the corpora tes. Id Agent signature re E EEE ADDRESS (-ST-ZIP E	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered Addition DATE	
office or agent. I is NATURE E ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of registered agent of registered agent of the state of the st	ite of Florid igations of, gent and title if	a. Such change section 607.050 applicable. TORS DELE DELE	TE TE	the abo horized la Statu 13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAA 6.1 TITL 6.2 NAA	ve-named corp by the corpora tes. Id Agent signature re E EEE ADDRESS (-ST-ZIP E	oration submits this statement for the purpose of changing its registered tition's board of directors. I hereby accept the appointment as registered Addition DATE	