IA ,	D LIABILITY COMPA NNUAL REPORT 1999	NY WY	<b>Kath</b> Secr	PARTMENT OF erine Harris etary of State DE CORPORATI	i	1		OF STATE ORPORATIONS PN 4: 16
FILING F \$ 188.7	FEE Annual Report 75 Make Check F	\$100.00 + \$88.75 Payable To: FLOF	Corporatio	n Supplemer	tal Fee			
1. Name ar		OCUMEN				!		
D	ALLAS ISAN,	T. T. C				1a. Principal Pla	ace of Busines	ss Address
	420 N.E. 27T					2420 N.	E. 271	TH STREET
L	IGHTHOUSE PO	INT FL 330	64			LIGHTHO	OUSE PO	DINT FL 33064
					·			
Principal	I Place of Business	2a. Mai	2a. Mailing Address			3. Date Organiz	ed or Qualified	d 3a. State of Formation
Suite Apt #	#. etc.	Suite A	Suite, Apt. #, etc.			11/19/1	.998	FL
Suite, Apt. #, etc.						4. FEI Number Applied For		
City & State	•	City & S	tate					Not Appli
Zip	Country	Zip		Country		5. Date of Last F	Report	6. Certificate of Status Des
	7. Name and Address	of Current Registeres	d Accel	1		1 4 4 1 1		\$8.75 Additional Fee Required
	7. Italile and Abbless	or current negistered	Agent	Name	6. N	ame and Addres	S OI NEW HAG	изтегео АдепиОпісе
TIVINI	ATION FL 333	24			Address (P			Zip Code
). Pursuant Is registered	at to the provisions of Section	s 608.416 and 608.508 both, in the Stale of Flo	3, Florida Statute orida. Such chan	Suite, a	Apt. #, etc.	liability company s	<b>FL</b>	Zip Code / / /
). Pursuant Is registered Is registered	at to the provisions of Section of office or registered agent, o ed agent, and accept the obliq	s 608.416 and 608.508 both, in the Stale of Flo gations.	orida. Such chan	City es, the above-nam ge was authorized	Apt. #, etc.	liability company s ive vote of a majorit	<b>FL</b>	Zip Code
). Pursuant is registered is registered SIGNATURI	it to the provisions of Section d office or registered agent, o	s 608.416 and 608.508 rooth, in the State of Flogations.	orida. Such chan	City es, the above-nam ge was authorized	Apt. #, etc.	liability company s ive vote of a majorit	FL ubmits this sta ty of the member	Zip Code
). Pursuant ls registered s registered SIGNATURI 0. Title	of to the provisions of Section doffice or registered agent, or ad agent, and accept the oblique to the decision of the decisi	s 608.416 and 608.508 rooth, in the State of Flogations.	orida. Such chan	City es, the above-nam ge was authorized	Apt. #, etc.	liability company s ive vote of a majoril	FL ubmits this sta ty of the member	Zip Code  Zip Code  atement for the purpose of char ers. I hereby accept the applicant
). Pursuant ls registered s registered SIGNATURI 0. Title	of to the provisions of Section of office or registered agent, or ed agent, and accept the oblig IE	s 608.416 and 608.508 rooth, in the State of Flogations.	orida. Such chan	Suite, 7 City es, the above-nam ge was authorized ent synther council with	Apt. #, etc.	liability company s ive vote of a majoril	Ubmits this state by of the member 10A1E Crit LIGHT	Zip Code  Atement for the purpose of charers. I hereby accept the approint.