**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # M12270** 1. Corporation Name

SALES/ALVIN, INC.

## **FILED** Jul 14, 1999 8:00 am Secretary of State

07-14-1999 90008 024 \*\*\*150.00



Principal Place	of Business	Mailing Address				CORCURATION TO THE PARTY OF THE CORCURATION OF THE	*** ***** ***		***************************************	
850 IVES DAIRY	RD STE 142A		850 IVES DAIRY RD STE TAKE							
MIAMI FL 33179		MIAMI FL 33179				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				
						03/07/1985			1	
2 Principal Pl	ace of Business	2a, Mailing Address				4. FEI Number	Applied For			
<b>-</b> ≒ '	ace of Edsiliess	26				59-2503811			Not Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.					$\overline{\Box}$	\$8.7	5 Additional	
	19-21	27 Suite 19-21				5. Certificate of Status Desired	Ш		e Required	
City & State		City & State				6. Election Campaign Financing		\$5.	00 May Be	
23		28				Trust Fund Contribution	ition Added to Fees			
Zip	Country	Zip	Country			8. This corporation owes the current	year			
24	25	29	30	30		Intangible Personal Property.	Yes X No			
	9. Name and Address of Curren	t Registered Agent	stered Agent			10. Name and Address of New Registered Agent				
				81	Name					
	ZER, CRAIG A.		82			et Address (P.O. Box Number is Not Acceptable)				
	1 BISCAYNE BOULEVARD						<u></u>			
	RTH FLOOR									
AVEN	ITURA FL 33180			84	City			85 2	Zip Code	
	•	•		34	City		FL	00  '		
11. Pursuant	to the provisions of sections 607.0502	and 607.1508, Florida Statu	tes, the ab	ove-	named corp	poration submits this statement for the purp	ose of cha	nging it	s registered	
office or i	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was	authorize	a bv	the corpora	ation's board of directors. I hereby accept the	ne appoin	ment a	s registered	
-	an latinial wait, and about the oblige								l	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regist					gent signature re	equired when reinstating)	DATE			
12. OFFICERS AND DIRECTORS				13.		ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	DP	DELETÉ	11 TITLE				L.	Chan	ige Addition	
NAME	WALTZER, ALVIN		1.2 N							
STREET ADDRESS	875 N.E. 195 ST., #211		1.3 ST		ADDRESS				Ì	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-\$		-ZIP					
TITLE			2.1 TITLE		}		L	Chan	ige Addition	
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS				İ	
CITY-ST-ZIP				2.4 CITY-ST-ZIP				<del></del>		
TITLE		L_] DELETE	•				L,	Chan	ige L Addition	
NAME			3.2 N	3.2 NAME						
STREET ADDRESS		•	3.3 STREET ADDRESS		ADDRESS				ł	
CITY-ST-ZIP			3.4 CiTY-ST-ZIP		-ZIP					
TITLE	L. DELLE IL		4.1 Ti	4.1 TITLE			L	Chan	nge Addition	
NAME			4.2 NAME		}				}	
STREET ADDRESS	•		4.3 S1	4.3 STREET ADDRESS						
CITY-ST-ZIP				TY-ST	-ZIP		<del></del>			
TITLE		DELETE	5.1 TI	5.1 TITLE			L	Chan	nge L Addition	
NAME			5.2 N	5.2 NAME					1	
STREET ADDRESS			5.3 S1	REET	ADDRESS		,			
CITY-ST-ZIP				TY-\$T	-ZIP					
TITLE	DELETE			1 TITLE			L	Chan	nge Addition	
NAME			6.2 N	AME						
STREET ADDRESS			6.3 51	REET	ADDRESS				{	
CITY-ST-ZIP				TY-ST						
14 I hereby ce	ertify that the information symplied with	this filing does not qualify for	the exem-	otion	stated in se	ection 119.07(3)(i). Florida Statutes, I furthe	er certify th	at the in	ntormation	

nereby certify that the information supplied with this tiling does not quality for the exemption stated in section 118.07(3)(t). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 configuration 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 changes for one attributes with an address.

SIGNATURE:

CR2E034 (5/99)

## ERA Sales / Alvin, Inc.

581146-10W8-24 M12270

850 Ives Dairy Road Miami, FL 33179 Office: (305) 652-8880 Fax: (305) 652-6617



July 6, 1999

Annual Reports Filings Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Sales/Alvin, Inc.

Dear Sir/Madam:

In reference to the above corporation's filing fee, please note that we never received 1st notice regarding same.

As instructed by your representative, enclosed please find check in the amount of \$150.00.

Thank you.