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PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name

DOCUMENT # M19234



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90084 049 ***150.00

CAHE AL	JTO BODY, INC.								
Principal Place	of Rusiness	Mailing Address			#	iliil fini franchini) # U U	Of Dit Cick Con	
% FITZLOY SM		% FITZLOY SMITH							
2826 PARK RD	un	2826 PARK RD							
PEMBROKE PARK FL 33009		PEMBROKE PARK FL 33009			DO NOT WRITE IN THIS SPACE				
US		US			 Date Incorporated or Qualifed 08/09/1985 	<u> </u>			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
21		26			59-2653838		N	lot Applicable]
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional	
22		27			3. Commons of District Document		Fee F	tequired	
City & State		City & State			6. Election Campaign Financing	M		May Be	<u>_</u>
23		28			Trust Fund Contribution			to Fees	1
Zip	Country	Zip		intry	This corporation owes the cur	rrent year Inta	ngible	-7.	
24	25	29	30		Personal Property Tax.		Yes	□No	4
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New	Registered A	gent		1
SMIT	TH, FITZLOY								
2826 PARK RD.				82 Street Ad	ddress (P.O. Box Number is Not Accep	table)			
PEM	BROKE PARK FL 33009			83					
				84 City			85 Zip	Code	1
						<u> </u>			4
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida St of Florida, Such change wa	atutes, the a	bove-named co t by the corpora	propration submits this statement for the ation's board of directors. I hereby acception	ept the appoin	:hanging it tment as r	s registered egistered	
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505,	Florida Stat	utes.	•	•			ļ
SIGNATURE	· · · · · · · · · · · · · · · · · · ·	- 104 V	NOTE: Basistan		uired when reinstating)	DATE			١.
12.	Signature, typed or printed name of registered age	ID DIRECTORS	13.	Agent signature req	ADDITIONS/CHANGES TO O		DIRECT	ORS IN 12	3
TITLE	PD			nc I	TREBITION OF THE TOTAL OF THE				┥,
NAME	SMITH, FITZLOY	☐ DELETE		ILE }			Change	☐ Addition	1 :
STREET ADDRESS	JONGITE FILZ LUT	☐ DELETE					Change	☐ Addition	
		Li DELETE	1.2 N	WE			Change	☐ Addition	7,00
•	1360 NW 103 TERRACE	L) DELETE	1.2 N	WE REET ADDRESS			Change	☐ Addition	77 00 100
CITY-ST-ZIP			1.2 N/ 1.3 ST 1.4 CI	TY-ST-ZIP			☐ Change		20000
CITY-ST-ZIP	1360 NW 103 TERRACE	DELETE	1.2 N/ 1.3 ST 1.4 CI E 2.1 TI	TREET ADDRESS TY-ST-ZIP TLE					7,000,000
CITY-ST-ZIP TITLE NAME	1360 NW 103 TERRACE		1.2 N/ 1.3 S1 1.4 CI E 2.1 TI 2.2 N/	TREET ADDRESS TY-ST-ZIP TLE					20000
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1360 NW 103 TERRACE		1.2 N/ 1.3 ST 1.4 CI E 2.1 TI 2.2 N/ 2.3 ST	TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS					20000
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1360 NW 103 TERRACE		1.2 No 1.3 ST 1.4 CI 2.1 TT 2.2 No 2.3 ST 2.4 C	TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP				☐ Addition	2, 100,000
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1360 NW 103 TERRACE	☐ DELETE	12 Nv 1.3 S1 1.4 Cl 2.1 TI 2.2 Nv 2.3 S1 2.4 C	TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP			☐ Change	☐ Addition	30000
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1360 NW 103 TERRACE	☐ DELETE	1.2 NV 1.3 S1 1.4 CI 2.1 TI 2.2 NV 2.3 S1 2.4 CE 3.1 TI 3.2 NV	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS TTY-ST-ZIP TLE			☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1360 NW 103 TERRACE	☐ DELETE	12 Nv 1.3 S1 1.4 Cl E 2.1 Tl 2.2 Nv 2.3 S1 2.4 Cl E 3.1 Tl 3.2 Nv 3.3 S1	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS			☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1360 NW 103 TERRACE	☐ DELETE	1.2 NV 1.3 S1 1.4 CI 2.1 TI 2.2 NV 2.3 S7 2.4 C 3.1 TI 3.2 NV 3.3 S7 3.4 C	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1360 NW 103 TERRACE	☐ DELETE	1.2 NV 1.3 ST 1.4 CI 2.1 TI 2.2 NV 2.3 ST 2.4 C 3.1 TI 3.2 NV 3.3 ST 3.4 C 4.1 TI	TREET ADDRESS TY-ST-ZIP TILE AME TREET ADDRESS TY-ST-ZIP TILE TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TREET ADDRESS			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	1360 NW 103 TERRACE	☐ DELETE	1.2 N/ 1.3 ST 1.4 CI 2.1 Π 2.2 N/ 2.3 ST 2.4 C 3.1 Π 3.3 ST 3.4 C 4.1 Π 4.2 N	TREET ADDRESS TY-ST-ZIP TILE AME IREET ADDRESS ITY-ST-ZIP TILE ITY-ST-ZIP TILE ITY-ST-ZIP TILE AME			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1360 NW 103 TERRACE	☐ DELETE	1.2 NV 1.3 SI 1.4 CI 2.1 TI 2.2 NV 2.3 SI 2.4 CC 3.1 TI 3.3 SS 3.4 CC 4.1 TI 4.2 NV 4.3 SS	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TTY-ST-ZIP TLE TTY-ST-ZIP TLE TREET ADDRESS TTY-ST-ZIP TLE TREET ADDRESS			☐ Change	Addition	7, 1001000
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1360 NW 103 TERRACE	☐ DELETE	1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TT 3.3 ST 3.4 C 4.1 TI 4.2 N/ 4.3 ST 4.4 CI 4.4 CI	AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP			☐ Change	Addition Addition	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1360 NW 103 TERRACE	☐ DELETE	1.2 NV 1.3 SI 1.4 CI 2.1 TI 2.2 N 2.3 SI 2.4 C 3.1 TI 3.3 SS 3.4 C 4.1 TI 4.2 N 4.3 SS 4.4 CI 5.1 TI 5.2 N	TREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE ITY-ST-ZIP TLE AME ITY-ST-ZIP TLE AME ITY-ST-ZIP TLE ITY-ST-ZIP			☐ Change	Addition Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1360 NW 103 TERRACE	☐ DELETE	12 NV 1.3 ST 1.4 CI 2.1 TI 22 NI 2.3 ST 2.4 C 3.1 TI 3.2 NI 3.3 ST 3.4 .C 4.1 TI 4.2 NI 4.3 ST 4.4 CI 5.1 TI 5.2 NI 5.3 ST	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME			☐ Change	Addition Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1360 NW 103 TERRACE	DELETE	1.2 NV 1.3 SI 1.4 CI 2.1 TI 2.2 NI 2.3 SI 2.4 CI 3.1 TI 3.2 NV 3.3 SI 4.4 CI 5.1 TI 5.2 NI 5.3 SI 5.4 CI 5.4 CI 5.5 SI 5.4 CI 5.5 SI 5.4 CI	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP			☐ Change	Addition Addition Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	1360 NW 103 TERRACE	☐ DELETE	1.2 NV 1.3 SI 1.4 CI 2.1 TI 2.2 NI 2.3 SI 2.4 CI 3.1 TI 3.2 NV 3.3 SI 4.4 CI 5.1 TI 5.2 NI 5.3 SI 5.4 CI 5.4 CI 5.5 SI 5.4 CI 5.5 SI 5.4 CI	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE			☐ Change	Addition Addition Addition	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1360 NW 103 TERRACE	DELETE	12 NV 1.3 ST 1.4 CI 2.1 TI 2.2 NJ 2.3 ST 2.4 C 3.1 TI 3.2 NV 3.3 ST 3.4 C 4.1 TI 4.2 NJ 4.3 ST 4.4 CCI 5.1 TM 5.2 NJ 5.3 ST 5.4 CI 6.1 TI 6.2 NJ	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE			☐ Change	Addition Addition 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.

SIGNATURE: >