## PROFIT CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State · DIVISION OF CORPORATIONS

i. Corporatio	MENT # M22195						
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D.:	and the second	Mailing Address					TELY ENDY JEEN
Principal Plac		Mailing Address					
2901 Stirling RD. 2901 Stirling RD. Suite 309 Suite 309					•		
FT LAUDERDAL	E FL 33312	FT LAUDERDALE FL 33312	!		DO NOT WRITE IN THIS S	PACE	
				•	3. Date Incorporated or Qualifed		
			_		10/21/1985		
2. Principal P	tace of Business	2a. Mailing Address			4. FEI Number		plied For
21		Suite, Apt. #, etc.			59-2616062	\$8.75 A	t Applicable
Suite, Apt.	#, etc.	<b>⊢</b>			5. Certificate of Status Desired	Fee Re	
22 City & Stat		City & State			6. Election Campaign Financing	\$5.00	<u> </u>
23	~	28			Trust Fund Contribution	Added to	
Zip	Country	Žip	Cou	intry	8. This corporation owes the current year Intan	gible	
24	25	29	30				□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	gent	
14/200	AMARI AAROLYN A	•		81 Name			
	NMAN, CAROLYN B.			82 Street Addr	ess (P.O. Box Number is Not Acceptable) - " - "		
	i stirling road Te 203			\ <u></u>			
	T LAUDERDALE FL 33312-6531			83	• • • •		
700	I DAUDEIDAZE I E SONIZ-GONI			84 City	Éi	₹.5 Zip C	ode
44 5		2 4 007 450B Florida Finte		have seemed com	oration cultimits this statement for the purpose of ch	enion its	registerad
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	/ and 607.1508, Florida Statut of Florida. Such change was a	es, the a uthorized	d by the corporation	oration submits this statement for the purpose of chon's board of directors. I hereby accept the appoint	n∋ntasreo	gistered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Flo	rida Stat	utes.			[
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOT)	Registered	Agent signature require	) when reinstating) DATE		),
12.	OFFICERS AND	<del></del>	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	DV	☐ DELETE	1.1 Π	TLE	·	Change	☐ Addition
NAME	WEINMAN, CAROLYN B.			ALIF			
STREET ADDRESS	3650 N 36 AVE #14		1.2 N		+ + M240 - 1	_ ,	
CITY-ST-ZIP				TREET ADDRESS	Master / Master /	_ ,	
TITLE	HOLLYWOOD FL		1.3 ST 1.4 CI	TREET ADDRESS		· ·	
	DPS	☐ DELETE	1.3 S 1.4 Cl 2.1 Tl	TREET ADDRESS TTY-ST-ZIP TLE		_ ,	
NAME	DPS WEINMAN, ANDREA	☐ DELETE	1.3 S 1.4 Cl 2.1 Tl 2.2 N	TREET ADDRESS TTY-ST-ZIP TLE AME		_! Change	
STREET / DORESS	DPS WEINMAN, ANDREA 303 DUNWOODY	[] DELETE	1.3 S 1.4 Cl 2.1 Tl 2.2 N 2.3 S	TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS	11 (1900) 11 (1900)	_! Change	
STREET ADDRESS CITY-ST-ZIP	DPS WEINMAN, ANDREA		1.3 S 1.4 Cl 2.1 Tl 2.2 N 2.3 S 2.4 C	TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS ZIY-ST-ZIP		_! Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL	☐ DELETE	1.3 ST 1.4 CI 2.1 TI 2.2 N. 2.3 ST 2.4 CI 3.1 TI	TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS ZTY-ST-ZIP TLE		Change	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH		1.3 S 1.4 Cl 2.1 Tl 2.2 N 2.3 S 2.4 C 3.1 Tl 3.2 N	TREET ADDRESS TTY-ST-ZIP TREET ADDRESS ZTY-ST-ZIP TREET ADDRESS ZTY-ST-ZIP TREET AME		Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE _NAME STREET ADDRESS	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH 3650 N. 36TH AVE #14		1.3 ST 1.4 CI 21 TI 22 NV 23 ST 2.4 CC 3.1 TI 32 NV 3.3 ST	TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS ZTY-ST-ZIP TLE AME TREET ADDRESS		Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH		1.3 ST 1.4 CI 21 TI 22 NV 23 ST 2.4 CC 3.1 TI 32 NV 3.3 ST	TREET ADDRESS TTY. 5T- ZP TILE AME TREET ADDRESS ZTY- ST- ZP TILE AME TREET ADDRESS ZTY- ST- ZP TILE AME TREET ADDRESS ZTY- ST- ZP	17 (18) (18) (18) (18) (18) (18) (18) (18)	Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH 3650 N. 36TH AVE #14	□ DELETE	1.3 ST 1.4 CC 2.1 TC 2.2 NC 2.3 ST 2.4 CC 3.1 TC 3.2 NC 3.3 ST 3.4 CC 3.	TREET ADDRESS TTY. 5T- ZP TILE AME TREET ADDRESS ZTY- 5T- ZP TILE AME TREET ADDRESS ZTY- 5T- ZP TILE AME TREET ADDRESS ZTY- 5T- ZP TILE TREET ADDRESS	17 (18) (18) (18) (18) (18) (18) (18) (18)	Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH 3650 N. 36TH AVE #14	□ DELETE	1.3 ST 1.4 CI 2.1 TI 2.2 N. 2.3 ST 2.4 CO 3.1 TI 3.2 N. 3.3 ST 3.4 CO 4.1 TI 4.2 N	TREET ADDRESS TTY. 5T- ZP TILE AME TREET ADDRESS ZTY- 5T- ZP TILE AME TREET ADDRESS ZTY- 5T- ZP TILE AME TREET ADDRESS ZTY- 5T- ZP TILE TREET ADDRESS	17 (18) (18) (18) (18) (18) (18) (18) (18)	Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH 3650 N. 36TH AVE #14	□ DELETE	1.3 ST 1.4 CD 2.1 TI 22 N. 2.3 ST 2.4 CD 3.1 TI 3.2 N. 3.3 ST 3.4 CD 4.1 TI 4.2 N. 4.3 ST	TREET ADDRESS TITY. ST. ZIP TILE AME TREET ADDRESS ZITY. ST. ZIP TILE AME TREET ADDRESS ZITY. ST. ZIP TILE AME TREET ADDRESS ZITY. ST. ZIP TILE AME TREET ADDRESS		Change Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET / DORESS	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH 3650 N. 36TH AVE #14	□ DELETE	1.3 ST 1.4 CD 2.1 TI 22 N. 2.3 ST 2.4 CD 3.1 TI 3.2 N. 3.3 ST 3.4 CD 4.1 TI 4.2 N. 4.3 ST	TREET ADDRESS TITY ST-ZIP TILE AME TREET ADDRESS ZITY ST-ZIP TILE AME TREET ADDRESS ZITY ST-ZIP TILE AME TREET ADDRESS ZITY ST-ZIP TILE TREET ADDRESS TITY ST-ZIP		Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET / DORESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	DPS WEINMAN, ANDREA 303 DUNWOODY HOLLYWOOD FL T WEINMAN, RALPH 3650 N. 36TH AVE #14	☐ DELETE	1.3 5° 1.4 Cl 2.1 Tl 2.2 N. 2.3 5° 2.4 Cl 3.1 Tl 3.2 N. 3.3 5° 3.4 Cl 4.1 Tl 4.2 N. 4.3 Sl 4.4 Cl 5.1 Tl 5.2 N. 5.3 5° 5.4 Cl	TREET ADDRESS TITY-ST-ZIP TILE AME TREET ADDRESS TITY-ST-ZIP TILE AME TREET ADDRESS TITY-ST-ZIP TILE TREET ADDRESS TITY-ST-ZIP TILE AME TREET ADDRESS TITY-ST-ZIP TILE AME TREET ADDRESS TITY-ST-ZIP TILE TREET ADDRESS TITY-ST-ZIP TILE TREET ADDRESS TITY-ST-ZIP TILE TITY-ST-ZIP		Change Change Change	Addition  Addition  Addition
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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 orth; 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 chapted, or on an affachment with an address, with a lightness of the empowered.

SIGNATURE

1/15/99

(954)964-2660

**FILED** 

Apr 27, 1999 8:00 am Secretary of State 04-27-1999 90142 050 \*\*\*150.00