**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M39435

SCHARF & ASSOCIATES, INCORPORATED

Principal Place	e of Business		Mailing A	ddress				1 (86) 0011 (88 (11) (0)() 01()	HE   BIN 91811	01411 01011 01 <u>6</u> 11 1		
C/O SAMUEL S	S. GOREN ESC	C/O SAMI	C/O SAMUEL S. GOREN ESQ.					,				
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FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309							<u> </u>	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
							3.	10/02/1986				
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22			⊢¬	27			5.	Certificate of Status Desired	×	Fee Re		
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3			28					Trust Fund Contribution		Added	, ,	
Zip		Country	Zip		Coun	гу	8.	This corporation owes the cur	ent year Ir	ntangible		
24	25		29	30				Personal Property Tax.			□No	
	9. Name	and Address of Cui	rrent Registered	Agent			10.	Name and Address of New	Registered	Agent		
						1 Name					}	
	REN, SAMUE				1	2 Street Add	dress (P	O. Box Number is Not Accept	able)	<del></del>		
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office or re	registered age	ons of Sections 607. Int, or both, in the St h, and accept the ob	ate of Florida. Suc	ch change was a	uthorized l	y the corporat	rporation tion's bo	submits this statement for the ard of directors. I hereby acce	purpose of the purpos	if changing its pintment as re	registered   gistered	
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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 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

CITY-ST-ZIR

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

954-566-2700

Change

Addition

**FILED** 

Jan 29, 1999 8:00 am Secretary of State

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