	PROFIT					
	CORPORATION					
	ANNUAL REPORT					
1999						
(OCUMENT #					

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

D Amendment attached

COLL DAVIDSON CARTER SMITH SALTER & BARKETT, PRO FESSIONAL ASSOCIATION

Principal Place of Business	Mailing Address		
C/O VANCE E. SALTER 3200 MIAM CENTER, 201 S. BISCAYNE BLVD. MIAMI FL 33131-2312 US	C/O VANCE E. SALTER 3200 MIAM CENTER. 201 S. BISCAYNE BLVD. MIAMI FL 33131-2312 US		
2. Principal Place of Business	2a. Mailing Address		
1	26		
Suite, Apt #, etc.	Suite, Apt #, etc		
2	27		
City & State	City & State		
3	28		
Zip Country	Zip Country		
[25]	29 30		
9. Name and Address of Cur			

SALTER, VANCE E. 201 S. BISCAYNE BLVD. 3200 MIAMI CENTER MIAM! FL 33131

FILED
99 MAR 11 PM 2:46
SECRETARY OF STATE TALLAHASSEE, FLORIDA
TOURIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed		
07/10/1987		
4. FELNuniber		1 1
59-2819139		
5. Certificate of Status Desired	l. t	\$8.75

Applied For Not Applicable Additional

6. Election Campaign Financing Trust Fund Contribution

ee Required \$5.00 May Be

8. This corporation owes the current year Intangible Personal Property Tax

| I Yes

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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84 City

SIGNATURE	Signature, typed or printed name of regulared agent and	ing to the city of the control of		
12.	OFFICERS AND D	a -, , ,	êgisterek Ageat signat ne te ₹ 13.	,
TITLE	DV	☐ DELF TE	111011	
NAME	COLL, NORMAN A.		1.2 NAME	
STREET ADDRESS	201 S BISCAYNE BL #3200		13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		14 CITY-51-Z#	
TITLE	DV	[DELETE	21 TITLE	
NAME	DAVIDSON, BARRY R.		2.7 NAME	
STREET ADORESS	201 S BISCAYNE BL #3200		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		2.4 CHY-51-2iP	
TITLE	DY	DELETE	311016	
NAME	CARTER, ERANCIS L.		3.2 NAME	
STREET ADDRESS	201 S-873CAYNE BL #3200		3 3 STREET ADDRESS	
CITY-ST-ZIP	NJAMI FL		34 CITY-S1-ZIP	
TITLE	DP	[] DETELL	4.1 TIFLE	
NAME.	SMITH, RICHARD C.		4 2 NAME	
STREET ADDRESS	201 S BISCAYNE BL #3200		43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		44 CiTY- \$1-Zir*	
TITLE	DS	[] DELETE	5 1 Till F	
NAME	SALTER, VANCE E.		5.2 NAME	
STREET ADDRESS	201 S BISCAYNE BL #3200		53 STREET ADURESS	
CITY-ST-ZIP	MIAMI FL		54 City-\$1-ZiP	
TITLE	DT	[] DELETE	617tttF	
NAME	BARKETT, JOHN M.		6.2 NAME	
STREET ADDRESS	201 S BISCAYNE BL #3200		63 STREET ADDRESS	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 [| Change [] Addition

[| Change

[] Chance [] Addition

[] Addition

Addition

LAT 3.18-99

600002808775----03/17/99--01002--006 ****193.75 ****150.00

64 CITY-S1-7(*) 14. Thereby certify that the information supplied with this filting 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 eath; 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 govern attachment with an address, with all other like empowered.

SIGNATURE:

BIGHING OFFICER OF DIRECTOR SELFY DIR.

CR2E034 (11/98)