## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 1999



FLÖRIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	M63	455
1. Corporation Name			,

**URBANNA CORPORATION** 

Principal Place of	f Business	Mailing Address		
1925 BRICKELL AV D-205 MIAMI FL 33129	/E	1925 BRICKELL A D-206 MIAMY FL 33129	<b>V</b> E	DO NOT WRITE II
US		US		3. Date Incorporated or Qualified 12/09/1987
2. Principal Place		2a. Məiling Addr		4. EEI Number 65-0100000
Suite, Apt. #, 4	etc	Suite Apt #	, etc	5. Certifcate of Status Desired (
City & State		City & State		6, Election Campaign Financing Trust Fund Contribution
Zıp	Country [25]	Z <sub>(p</sub>	Country  [30]	8. This corporation owes the current y Personal Property Tax
	9. Name and Address of Co	urrent Registered Agent	81 Name	10. Name and Address of New Regi
BESU,	ROGER			Address (P.O. Box Number is Not Acceptable)

1925 BRICKELL AVE STE D-206 MIAMI FL 33129

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	DO NOT WRIT	E IN TH	IS SPACE	
3. Da	ite Incorporated or Qualifed			
12	2/09/1987			
4, FE	LNamber		i   4	Applied For
65	5-0100000		1	Applied For Not Applicable
5. Ge	rtifcate of Status Desired	(1		Additional Required
1	ection Campaign Financing ust Fund Contribution	[]	<b>\$5.00</b> May Be Added to Fees	
	is corporation owes the correctional Property Tax	sit year l	Intangible [ ]Yes	[]No
10. Na	me and Address of New R	egistere	d Agent	

84 City 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

83

SIGNATURE	Signature typed or printed name of registered agent and title if applicable	(NÓTE Re	quibried Agent signature req
12.	OFFICERS AND DIRECTORS	,	13.
TITLE	D	DELETE	11 TillE
NAME	BESU, ROGER		1.2 NAVE
\$TREET ADDRESS	1925 BRICKELL AVE, STE D-206		13 STREET ADDRESS
City-\$1-ZIP	MIAMI FL 33129		14 C(TY-ST-ZIP
TITLE	DPS	DELETE	211015
NAME	BESU JORGE		2.2 NASIE
STREET ADDRESS	1925 BRICKELL AVE, STE D-205		23 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL 33129		2 4 OTY-ST-ZIF
TITLE	(	[ ] DELETE	311/11/6
NAME			3.2 NAME
STREET ADDRESS			3.3 STREET ADDRESS
C(TY-ST-ZIP			34 C(TV-ST-ZiP
TITLE	Į	[ ] DELETE	4.1 Tille
N ME			4 2 NAME
S REET ADDRESS			43 STREET ADORESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE		DELETE	5 1 THILE
NAME			5.2 NAME
§TREET ADDRESS			5 3 STREET ADORESS
CITY-ST-ZIP			5.4 CP Y-ST-7/P
TITLE		DELETE	6 TITLE
NAME			6.5 NYVIE
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			64 C/1Y-S1-ZIP

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

400002823**26%** -<sup>1.14</sup>\$\*\* -03/30/39--01034--023 \*\*\*\*150.00 \*\*\*\*150.00

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-{	Change	[ ] Additio	ſ



14. I hereby certify that the information supplied with this fill indicated on this annual report or supplemental arrival officer or director of the corporation or the ro-ceiver or Block 12 or Block 13 if changed, or on an article. at quality for the exemption etails in Section 119.07(3)(i). Florida Statutes. I further certify that the information be and accurate and that my signature shall have the same legal effect as if made under oath; that I am an invered to execute this open as required by Chapter 607, Florida Statutes, and that my name appears in

SIGNATURE:

1/99 (30t)874-UUSS