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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M73333

1. Corporation Name 🐇 🗅 FIRST: CHOICE: INDUSTRIES, INC. 网络西非洲 海 Principal Place of Business Mailing Address 10267 N.W. 46 STREET 10267 N.W. 46 STREET SUNRISE FL 33351 SUNRISE FL 33351 3. Date Incorporated or Qualifed 03/23/1988 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0037442 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 27 22 City & State City & State 6. Election Campaign Financing Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Zip Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90028 023 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

Yes

Not Applicable

:		81	Name	at the first of the first of the first of the first of the	وأسأح الوساري	Section 1994	
PLANAS, HENRY J. 6246 NW 125TH AVENUE CORAL SPRINGS FL 33076			1441110				
			82 Street Address (P.O. Box Number is Not Acceptable)				
			83 (67.24 - 12.25%) 1.5 (7.5 (7.5 (7.5 (7.5 (7.5 (7.5 (7.5 (7				
-1	مه بوغ في ا	84	City	190, Sent to 10 22 178 to 4 2 10 2 10 2 10 2 10 2 10 2 10 2 10 2	85 Zip C	ode	
		1	•	<u>FL</u>			
office or re	to the provisions of Sections 607.0502 and 607.1508, Florida Status agistered agent, or both, in the State of Florida. Such change was in familiar with, and accept the obligations of, Section 607.0505, Fl	authorized by	the corpo	corporation submits this statement for the purpose of ration's board of directors. I hereby accept the appoin	changing its ntment as reg	registered gistered	
SIGNATURE			:	equired when reinstating) DATE			
	Signature, typed or printed harrie or registered agont that the		it signature re	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
12.	OFFICERS AND DIRECTORS DELETE	13.			☐ Change	Addition	
TITLE				4.5.4.6.4.4.4.4.4.2.2.2.2.2.2.2.2.2.2.2.2.2	3-	_	
NAME	PLANAS, HENRY J.	1.2 NAME					
STREET ADDRESS	10267 N.W. 46TH STREET	1.3 STREE	i				
CITY-ST-ZIP	SUNRISE FL	1.4 CITY-S	T-ZIP		Change	☐ Addition	
TITLE	DELETE	2.1 TITLE			☐ Criange	L Addition	
NAME		2.2 NAME					
STREET ADDRESS		2.3 STREE	T ADDRESS		٠,		
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NAME .		4, 2 NAME	ļ			•	
30.50 03 11		43STREE	TADDRESS				
STREET ADDRESS		4.4 CITY-S					
CITY-ST-ZIP	□ DELETE	5.1 TITLE	1-217		Change	☐ Addition	
TITLE		5.2 NAME			_		
NAME			T ADDRESS	<u> </u>		•	
STREET ADDRESS	[₂₉	5.4 CITY-S		1. 2. 64 3.			
CITY-ST-ZIP	The second	5.4 CITY-S 6.1 TITLE	1-21	4 4 4 4 4 4	Change	☐ Addition	
TITLE	20080 P. a 188 x 1175.88			•	Chlange		
NAME		6.2 NAME					
STREET ADDRESS	CHARLES CO.	6.3 STREE	TADDRESS				
CITY-ST-ZIP	·	6.4 CFTY-S					
	Dentify that the information supplied with this filing does not qualify on this angual report or supplemental annual report is true and ac	for the exempt	ion stated	in Section 119.07(3)(i), Florida Statutes. I further cei	tify that the i	ntormation	

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.