PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90031 030 ***158.75

	DEVELOPMENT CORP.												
Principal Place	e of Business	Mai	ling Address				\neg	1 (4010E): 111 (8401 a)(() 00 1 21 0	***************************************			41. 414144.
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SUITE 1870			SUITE 1870					DO NOT WRITE IN THIS SPACE					
MIAMI FL 33130 US		MIAI US	MIAMI FL 33130					3. Date Incorporated or Qualifed					
03		00						04/04/1988	Quanto				
2. Principal Pl	lace of Business	2a.	Mailing Address					4. FEI Number				App	lied For
21		26	-				l	65-0051119		4		Not	Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					5. Certifcate of Status D	nairod	7	\$8.	75 A	dditional
22		27						5. Certificate of Status D	esireu	<u> </u>	F	ee Rec	quired
City & State	e		City & State					6. Election Campaign Fi	inancing		\$5	5.00	May Be
23		28						Trust Fund Contributi	on		A	ded to	Fees
Zip	Country		Zip	Cou	intry		-	8. This corporation ower	s the cur	rent year l			_
24	25	29		30				Personal Property Ta			Ye	s	□No
	9. Name and Address of Curren	t Regist	ered Agent		1			10. Name and Address	of New	Registe <u>re</u>	d Agent		
1/41 8	N O SAMPENOE III				81	Name							}
	N, S. LAWRENCE III				82	Street A	Address	s (P.O. Box Number is No	t Accept	able)			
	1 SOUTHWEST 8TH ST							<u> </u>					
	E 1870				83								
MIAN	MI FL 33130				84	City					. 85	Zip C	ode
	to the provisions of Sections 607.050					•				F	LÍ	•	
office or n						ina comor							
office or n agent. I a	to the provisions of Sections 607.000. registered agent, or both, in the State im familiar with, and accept the obligat	tions of,	Section 607.0505, Fi	orida Stat	utes.				· 	DATE			
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14. 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.