1999

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FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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

03-29-1999 90008 031 \*\*\*150.00

## DOCUMENT # M79875

Country

9. Name and Address of Current Registered Agent

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**GOLDSTEIN, IRVING** 23360 MIRABELLA CIR S **BOCA RATON 33433** 

Principal Place of Business	Mailing Address
1560 SE 3RD COURT DEERFIELD BEACH FL 33441	23060 SANDALFOOT PLZ DRIVE BOCA RATON FL 33428 US
2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	27 City & State

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DO NOT WRITE IN THIS SPACE

Applied For -Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

Country		8. This corporation of	a. This corporation owes the current year Intangible							
		Personal Property	y Tax.	Yes	□No					
		10. Name and Addre	ess of New Registered	Agent						
8	Name									
8	Street Ac	ldress (P.O. Box Number is	s Not Acceptable)							
8	33									
8	4 City			85 Z	ip Code					

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

05/09/1988

65-0057932

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. I hereby accept the appointment as registered

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agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE	Signature, typed or printed mame of registered agent and title if applicable.	/NOTE: Registered A	gent signature re	quired when reinstating)		DATE		i		
12.	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	D DEL	LETE 1.1 TITU					Change	Addition		
NAME	GOLDSTEIN, IRVING	1.2 NAM	E		r					
STREET ADDRESS	23360 MIRABELLA CIR S	1.3 STR	EET ADDRESS							
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY	-ST-ZiP	•						
TITLE	TS DEL	LETE 2.1 TITL	E				Change	☐ Addition		
NAME	GOLDSTEIN, DAVID	2.2 NAM	E	*						
STREET ADDRESS	7739 VILLA NOVA DR N	2.3 STR	EET ADDRESS			رادرسا ياسح⇔				
CITY-ST-ZIP	BOCA RATON FL	2.4 Cm	/-ST-ZIP							
TITLE	□ DEL	LETE 3.1 TITL	:				Change	☐ Addition		
NAME		3.2 NAM	E							
STREET ADDRESS	•	3.3 STR	EET ADDRESS					,		
CITY-ST-ZIP		3.4. CIT	/-ST-ZIP							
TITLE	DEL	LETE 4.1 TITL	E				Change	Addition		
NAME	•	4. 2 NAA	4E							
STREET ADDRESS		4.3 STR	EET ADDRESS							
CITY-ST-ZIP		4.4 CITY	-ST-ZIP							
TITLE	☐ DEL	LETE 5.1 TITL	<b> </b>	•	•		Change	Addition		
NAME ]	,	5.2 NAM	E							
STREET ADDRESS		5.3 STR	EET ADDRESS							
CITY-ST-ZIP			-ST-ZIP							
TITLE	☐ DEL	LETE 6.1 TITL	E				Change	☐ Addition		
NAME	3	6.2 NAM	E į			•				
STREET ADDRESS	•	6.3 STR	EET ADDRESS							
CITY-ST-ZIP		6.4 CITY	-ST-ZIP							

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.

SIGNATURE:

