

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

FILED
May 19, 1999 8:00 am
Secretary of State

05-19-1999 90006 006 ***900.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M93607**

1. Corporation Name
BOCA VEN LAND, INC.



Principal Place of Business LEO HENRIQUEZ 1401 HWY A1A - STE 203 VERO BEACH FL 32963 US	Mailing Address LEO HENRIQUEZ 1401 HWY A1A - STE 203 VERO BEACH FL 32963 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Zip 29
Country 25	Country 30

3. Date Incorporated or Qualified 08/03/1988	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 65-0092937	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HAYS, RICHARD J.
7200 W. COMMERCIAL BLVD.
SUITE 207
LAUDERHILL FL 33319**

O. Box Number is Not Acceptable)

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, I am office or registered agent, or both, in the State of Florida. Such change of agent, I am familiar with, and accept the obligations of, Section 607.

I submit this statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable.

Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12																																																																																																												
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14. 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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/99

Daytime Phone #

361-231-2929

CR2E034 (11/98)