PROFIT CORPORATION ANNUAL REPORT 1999 FUNCTION FUNCTION CORPORATION ANNUAL REPORT 1999 FUNCTION FUNCT	FILE	E NOW: FILING FEE A	FTER MAY 1ST	S \$55	0.00		_ FILE	D		0327465
	CORPORATION Katherine ANNUAL REPORT Secretary				e Harris of State		Apr 29, 1999 8:00 am Secretary of State			
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CARMAN, DEBORAH A ESO. 165 EAST PALMETTO PARK ROAD BOCA RATON FL 33432 1 Name 17. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or regulating agent, or both in the State of Florids. Study change was an dhorids by the corporation is board of directors. These yacong the approxes of changing its registered office or regulating agent, or both in the State of Florids. Study change was an dhorids the statement for the purpose of changing its registered office or regulating agent and provide the oblights to of Section 607.0005. Florids Statutes. 18. CRATURE Imme 19. Pursuant to the provisions of Section 607.0005. Florids Statutes, the above-named corporation is board of directors. Thesely accept the approxes of the approxement of the purpose of changing its registered office or regulating agent and information. 10. EXTRACT 10. Extract 2. CFFICERS AND DIRECTORS 13. ADDITIO/ISICHANGES TO OFFICERS AND DIRECTORS 13. 107.0 BEAR ISLAND DRIVE 13. 107.0 BEAR ISLAND	Zip 24	25	29	30			Personal Property Tax.			
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Image: Stress Address Image: Stress Add	16 5	EAST PALMETTO PARK ROAD				Street Addre	ess (P.O. Box Number is Not Acceptable)			
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indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the sume legal effect as if made under oath; that I am an	14. I hereby c	ertify that the information supplied wit	h th s filing does not qualify for	the exer	mption s	stated in Se	ction 119.07(3)(i), Florida Statutes. I further c	erti'y that the i	formation	1

4. Thereby Crainity that the information supplied with it's hind does not quality for the exemption stated in Station 119-07(3)), Fonda Statides, Indiner certuly 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 cirector 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 n Block 12 or Block 13 if changed, or on an attachment with an address, with all or her like empowered.

SIGNATIJRE: Manager Statute MARIENE MILLS

<u>4/23/99 561 471-8993</u> Date Daytime Phone #