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PROFIT CORPORATION ANNUAL REPORT

1999

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUN 1. Corporation	MENT # P9200000	3988			1			
i, Corporation	ROCESSING, INC.							
LOAN FF	1002331143, 1140.				(100) 100 100	B 51811 98111 88151 8811 881	(4 111111 101 0 11111 1	(6) (1) (1) (1) (1)
Principal Place	of Business	Mailing Address				i		
543 N.W. 77 ST	T. #201	43 N.W. 77 ST. #201						
STE 201 STE-201 BOCA RATON FL 33487 BOCA RATON FL 33487				DO NOT WRITE IN THIS SPACE				
BOCA RATON FL 33487 BOCA RATON FL 33487 US US				3. Date Incorporated or Qualifed				
	e of address)				11/13/1992			
(change of address) 2. Principal Place of Business 2a. Mailing Address				4, FEI Number		1 1 1	olied For	
21 19190 Westbrook Drive (1267)				65-0369334	, , .		Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State				5 Certificate of Status	s Desired 🏻 🗷 🏢	\$8.75 A Fee Red		
City & State		City & State			A Floation Compaign	Financing		·
City & State City & State City & State City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country		Country		8. This corporation or		Intangible	
24 3343	14 25 Palm Beach 29		10		Personal Property			□No
	9. Name and Address of Current Reg	istered Agent			10. Name and Addre	ss of New Registere	d Agent	_
D∩0i	KIN & SHURPIN P.A.		81	Name				
	GLADES RD.		82	Street Add	dress (P.O. Box Number is	Not Acceptable)		
	E 114		83			·		_
	A RATON FL 33431							
			84	City		F	85 Zip C	Code
		_				-	_ , ,	!-4
11 Pursuant 9	to the provisions of Sections 607,0502 and	607,1508, Florida Statutes	the above	-named cor	rporation submits this state:	ment for the purpose	of changing its i	registerea
l office or re	to the provisions of Sections 607.0502 and egistered agent, or both, in the State of Flo	rida. Such change was auti	norizea by i	tne corpora	rporation submits this state ition's board of directors. I h	ment for the purpose nereby accept the app	of changing its i pointment as reg	registered gistered
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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 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE;