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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9200006247

1. Corporation Name

NORTH HILLS PRODUCTION CO	).
D. A. Diversión	Matter Address
Principal Place of Business	Mailing Address
840 N.W. 72ND TERRACE PLANTATION FL 33317	840 N.W. 72ND TERRACE PLANTATION FL 33317

## **FILED** Feb 02, 1999 8:00am **Secretary of State**

02-02-1999 90005 011 \*\*\*150.00



PLANTATION FL 33317		PLANTATION FL 33317							
						DO NOT WRITE IN THIS S	PACE		7
	4					3. Date Incorporated or Qualifed			
						11/18/1992			
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number	L A	pplied For	] ;
21		26				65-0372684	N	ot Applicable	1 4
Suite, Apt.	#, etc.	<u></u> ⊢ ·	pt. #, etc.			5. Certifcate of Status Desired .		Additional	ĺ
22		27						equired	-
City & Stat	e	<del></del>	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	. Country	<b>├</b> ──	Zip Country			8. This corporation owes the current year Intangible			
24	. 25	29	1	10			Yes	□No	
	9. Name and Address of Curren		jent			10. Name and Address of New Registered Ag	jent		ł
ALV	ESHIRE SEAN C	Not the River		81	Name	•			
				82	Street Add	ress (P.O. Box Number is Not Acceptable)			1
070	NW-72 TERRACE					。 獨有一一大大,以及一個Maters 1987年,我有效是其间是有 医解析的 维建斯拉斯斯特	16 E 103 11 <b>2</b> 5	Character to character	
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der hard to a	mylectical adult			74	City	FL	85 "Zip	Code	
		2 and 607.1508.	Florida Statutes	the above	e-named corp	poration submits this statement for the purpose of ch	anging its	s registered	1
office or r	egistered agent, or both, in the State	of Florida. Such	change was aut	horized by	the corporation	on's board of directors. I hereby accept the appointr	nent as re	egistered	
agent. I a	m familiar with, and accept the obligat	ions of, Section	607.0505, FIOR	ia Statutes	•				
SIGNATURE		. 100 9 6 11	WOTE D		(	ad when reinstating) / ˈˈaːːː̞ˈ- DATE		· .	-
12.	Signature, typed or printed name of registered agen OFFICERS AN		(NOTE: F	13.	i signature require	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DPS IN 12	1
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NAME	ALVESHIRE, SEAN C			1.2 NAME		•			
STREET ADDRESS	840 NW 72 TERRACE			1.3 STREET	ADDRESS				Įį
CITY-ST-ZIP	PLANTATION FL			1.4 CITY-ST	r-Z!P				Ì
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NAME:				2.2 NAME			٠.	-	
STREET ADDRESS				2.3 STREET	ADDRESS	,		: .	
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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 attaching not with an address, with all other like empowered.