## 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 # P92000010978

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LEVMAR	RC, INC.				}		
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Principal Place of Business Mailing Address ,						ARTON INGIL ARTON NETIS (REAL TOLL TAR)	
20520 N.E. 22	COURT	20520 N.E. 22 COURT					
NORTH MIAMI BEACH FL 331BO NORTH MIAMI BEACH FL 331			. 33180		·		
US US				•	DO NOT WRITE IN	THIS SPACE	
					3, Date Incorporated or Qualifed		
2. Principal Place of Business 2a. Mailing Addr					12/10/1992	A suite d Fee	
2. Principal Place of Business		2a. Mailing Address		4, FEI Number 56-0382998	Applied For		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3070302990	\$8.75 Additional		
22		27		5. Certifcate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current ye	<del></del>	
24 25 29		29	30		Personal Property Tax. ☐No		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regist	ered Agent	
OTE:	IN MADOE!			81 Name			
STEIN, MARCEL			-	82 Street Add	eet Address (P.O. Box Number is Not Acceptable)		
20520 N.E. 22 COURT			L	e de las las estas estas des las des las des las des las des las des las las des las des las des las des las des			
NORTH MIAMI BEACH FL 33180				83			
			<u> </u>	84 City	1.73 M. R. 1 7.3 A. 17. 3 A. 28. 17. 17. 18. 18. 17. 17. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	85 Zip Code	
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11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statu f Florida, Such change was	ites, the ab	ove-named corp	poration submits this statement for the purposon's board of directors. I hereby accept the	se of changing its registered	
agent la	am familiar with, and accept the obligation	ons of, Section 607.0505, FI	lorida Statu	tes.	one board of an ostorio. Thoroby accept the	ppolitimont do regiotores	
SIGNATURE							
12.	Signature, typed or printed name of registered agent of OFFICERS AND			Agent signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICER		
TITLE	PD	DELETE	13.	F I		Change ☐ Addition	
NAME	STEIN, MARCEL		1.2 NAA	ł			
STREET ADDRESS	ACEDO NE DO COURT		ı	REET ADDRESS			
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33180	1		Y-ST-ZIP			
TITLE	STD	☐ DELETE	2.1 TITL		<del> </del>	☐ Change ☐ Addition	
NAME	STEIN, DEBRA		2.2 NAN	ł	•	-· · · ·	
STREET ADDRESS	ANTON ME ON COURT			REET ADDRESS	, .		
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33180	haran i	2.4 CIT	Y-ST-ZIP			
TITLE CONT	A RANGE OF STREET	DELETE	3.1 TITL			☐ Change ☐ Addition	
NAME	De Grand Control Contr		3.2 NAN	AE	•		
STREET ADDRESS	pur king tahun 1965. Majanggan kanggan punggan banggan banggan punggan banggan banggan punggan banggan banggan banggan banggan bang		3.3 STR	EET AOORESS	•	tan e tag e a se a see	
CITY-ST-ZIP	4 * 734		3.4. CIT	Y-ST-ZIP		<b>独宏期在元型推荐</b> 】	
TITLE		☐ DELETE	4.1 TITL	E	िस समान होता है। अने प्रमुख	Change ( Addition	
NAME.	la p	MASS CONTRACT	4. 2 NA	ME		ļ	
STREET ADDRESS			4.3 STR	EET ADORESS		. \	
CITY-ST-ZIP			4.4 CITY	r-ST-ZIP			
TITLE		. DELETE	5.1 TITL	E		☐ Change ☐ Addition	
NAME .	The Reservation of Augustic Co.		5.2 NAM	Æ	The state of the s		
STREET ADDRESS	1000 (P. C. ) 開。			EET ADDRESS	· · · · · · · · · · · · · · · · · · ·	*	
CITY-ST-ZIP				/-ST-ZIP			
TITLE	RESERVE AS COURT	☐ DELETE	6.1 TTTL	i		Change Addition	
NAME	AMMENT AND THE STA	-	6.2 NAV	tE i	•		

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 supplied 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:

STREET ADDRESS

CITY-ST-ZIP

**FILED** 

Jan 29, 1999 8:00am

**Secretary of State** 

01-29-1999 90027 045 \*\*\*150.00