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

Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90001 002 ***150.00

| r. Corporation | MENT # P92000 IN OF NAPLES, INC. | 011329 | | | | | |
|--------------------|--|---|-----------------|----------------------|---|---|--------------------|
| Principal Place | e of Business | Mailing Address | | | I FRANKADI SIN INNA SINI NASIL NAVIS DOSIL AL | 1101 (1 26 1 11 302 (111 6 | |
| 3033 RIVERA D | | 3033 RIVIERA DRIVE | | | | | |
| STE 201 | | SUITE 201 | | BO NOT WEITE IN T | HIG GDACE | | |
| NAPLES FL 34103 | | NAPLES FL 34103 | | | DO NOT WRITE IN THIS SPACE , 3. Date Incorporated or Qualifed | | |
| US | • | US | | | 12/11/1992 | | |
| 2. Principal Pi | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | plied For |
| 21 | | 26 | | | 65-0434482 | | t Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | • | 5. Certifcate of Status Desired | \$8.75 A | |
| 22 | | 27 | | | <u> </u> | Fee Re | - |
| City & State | е | City & State | | | 6. Election Campaign Financing | \$5.00 Added to | |
| 23 | | Zip | Cou | ntn: | Trust Fund Contribution | | o rees |
| Zip | Country | <u> </u> | 30 | iiu y | This corporation owes the current year Personal Property Tax. | | □No |
| 24 | 9. Name and Address of Currer | 29 | 30 | | 10. Name and Address of New Register | | |
| | 5. Name and Address of Curren | it registered Agent | | 81 Name | | | |
| BUDD, DAVID G | | | | | (2.0. B. N. share in Mark Associable) | | |
| 3033 RIVIERA DRIVE | | | | 82 Street Addr | ress (P.O. Box Number is Not Acceptable) | | |
| SUITE 201 | | | 83 | | | | |
| NAPLES FL 34103 | | | | | - 85 Zip C | Codo | |
| | | | | 84 City | F | 5L 85 Zip C | 20de |
| office or n | to the provisions of Sections 607.05c egistered agent, or both, in the State m familiar with, and accept the obligations of the state o | of Florida. Such change was a trions of, Section 607.0505, Flo | rida Stat | i by the corporation | poration submits this statement for the purpose on's board of directors. I hereby accept the ap | ppontiment as ret | gistered |
| 12, | | ID DIRECTORS | 13. | , | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | RS IN 12 |
| TITLE | DV | ☐ DELETE | 1.1 TI | TLE | | ☐ Change | ☐ Addition |
| NAME | RUBIN, BENJAMIN | | 1.2 N | WE | | | Į. |
| STREET ADDRESS | 3033 RIVIERA DRIVE, SUITE 2 | 01 | 1.3 S | REET ADDRESS | | | |
| CITY-ST-ZIP | NAPLES FL | | 1 <u>.4 C</u> | TY-ST-ZIP | | | |
| TITLE | V □ DELETE 2.1 TI | | TLE | | ☐ Change | Addition | |
| NAME | BUDD, DAVID G. | | 2.2 N | AME | | | } |
| STREET ADDRESS | s 3033 RIVIERA DRIVE, SUITE 201 238 | | | REET ADDRESS | | | 1 |
| CITY-ST-ZIP | NAPLES FL 240 | | ITY-ST-ZIP | | | | |
| TITLE | P | ☐ DELETE | 3.1 ₮ | rle (| • | Change | ☐ Addition |
| NAME | RUBIN, ALEX | | 3,2 N | AME . | | | - |
| STREET ADDRESS | 3033 FIVIERA DR STE 201 | | 3.3 S | REET ADDRESS | | | - |
| CITY-ST-ZIP | NAPLES FL | | | TTY-ST-ZIP | | | - Addition |
| TITLE | VAS | ☐ DELETE | 4,1 T | | | Change | ☐ Addition |
| NAME | RUBIN, LINDA | | 4, 2 N | | | | 1 |
| STREET ADDRESS | 3033 RIVIERA DR STE 201 | | 4.3 S | TREET ADDRESS | | | f |
| CITY-ST-ZIP | NAPLES FL | [] | | TY-ST-ZIP | | ☐ Change | Addition |
| TITLE | TS | ☐ DELETE | 5.1 Ti 5.2 N | | | (_] Change | ☐ ~00 (100) |
| NAME | RUBIN, HARRY | | 1 | REET ADDRESS | • | | |
| STREET ADDRESS | 3033 RIVIERA DR STE 201 | | | TY-ST-ZIP | | | |
| CITY-ST-ZIP | NAPLES FL | | 6.1 T | | | ☐ Change | Addition |
| TITLE | i | | 3.11 | · [| | | |

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.

David G. Budd,

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Vice President