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 # P9300000150

1. Corporation Name

4747 HO	LLYWOOD CORP.					1			
0.1-1-1-1-1	· ·	Mailine Addross					# 1000:1000; ISB (0100) LINE BOOK OFFICE WOLLD	ABSII SAIDO HABI	BILLI OBEL 1001
Principal Place of Business Mailing Address									
4747 HOLLYWOOD BLVD. 4747 HOLLYWOOD BLVD. STE. 103 STE. 103									
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021							DO NOT WRITE IN THIS SPACE		
1022111000 12 00021							3. Date Incorporated or Qualifed		
	• •	•					02/31/1992		1
2. Principal Place of Business 2a. Mailing Address				 :			4. FEI Number	Api	plied For
	26	• •				65-0378174	√ No	Applicable	
Suite, Apt.		uite, Apt. #, etc.					\$8.75	dditional	
22		27				7	=5_Certificate of Status Desired	Fee Re	quired
City & State	e		City & State				6. Election Campaign Financing	\$5.00	May Be
23	-	28				Trust Fund Contribution	Added to		
Zip	Country		Zip Country			8. This corporation owes the current year In	tangible		
24	25 29 30			,			Personal Property Tax.	Yes	□No
	9. Name and Address of Current						10. Name and Address of New Registered	Agent	
	,			81	Name				
DETARDO, NICK 4747 HOLLYWOOD BLVD.				_					
				82	Street A	Address (P.O. Box Number is Not Acceptable)		J	
SUITE 103			Ì	83					
HOLLYWOOD FL 33021				[
				84	City		FI	85 Zip (Code
.,,		1007 1740 51 11 01 11					ration submits this statement for the purpose o	f changing its	registered
office or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was at ons of, Section 607.0505, Flori	thorized ida Statu	by tes.	the corpor	ration	's board of directors. I hereby accept the appo	intment as re	gistered
SIGNATURE			B 110 14	•	/		when reinstating) DATE		
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re			- Agesti	it signature ret	dollan A	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D ·	DELETE	13.	ıF			7.0011101101011111111111111111111111111	Change	Addition
	DÉTARDO, NICK							_	
NAME	4747 HOLLYWOOD BLVD, SUITE 103			1.2 NAME					\ \
STREET ADDRESS	HOLLYWOOD FL	L 100	1.3 STREET ADDRESS						
CITY-ST-ZIP				1.4 C/TY-ST-ZIP				Change	Addition
TITLE	_			2.1 TITLE					١,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NAME			1	2.2 NAME					
STREET ADDRESS			2.3 STREET ADDRESS						
CITY-ST-ZIP			2.40		II-ZIP			Change	Addition
TITLE				3.1 TITLE				□ change	
NAME			3.2 NA	3.2 NAME					}
STREET ADDRESS	. 33		3.3 ST	3.3 STREET ADDRESS					}
CITY-ST-ZIP	<u> </u>		_	3.4. CITY-ST-ZIP					F=1 A.1 Par.
TITLE	DELETE 4.1		4.1 TIT	4.1 TITLE				☐ Change	Addition
NAME	4.2		4. 2 N	4. 2 NAME					
STREET ADDRESS	4.3		4.3 ST	4.3 STREET ADDRESS					
CITY-ST-ZIP	4,44			Y-S1	T-ZIP				
TITLE	☐ DELETE 5.11							Change	☐ Addition
NAME			5.2 NA	5.2 NAME					-
STREET ADDRESS			5.3 ST	REET	TADDRESS				
	1				T-ZIP				
CITY-ST-ZIP TITLE	DELETE 6.1				 +			☐ Change	Addition
			6.2 NA	ME	i				
NAME					T ADDRESS				}

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90008 049 ***150.00