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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P93000013376

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90129 041 ***150.00

OCCITIE	AST DETAILING, INC.							
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Principal Place	e of Business	Mailing Address		•.	1 (44)(44) (14 (41) (14) (14)		1988 11188 11111 11	
3350 BANKS RI		3350 BANKS RD						
#208 #208					50.1107.110	T. 110	00405	
MARGATE FL 33063 MARGATE FL 33063					DO NOT WR		SPACE	
US		US			3. Date Incorporated or Qualifed	ı		Į.
		D. Mailian Address			02/22/1993 4. FEI Number		An	olied For
2. Principal Place of Business 2a. Mailing Address 21					65-0391412	3	منسحها	Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					05-03914-12		\$8.75 A	
22 27					5. Certifcate of Status Desired		Fee Red	I
City & State City & State					6. Election Campaign Financing		\$5.00	May Be
23 28					Trust Fund Contribution		Added to	
Zip	Country	Zip	Count	гу —	8. This corporation owes the cu	rrent year Inta	angible	_
24	25	29	30		Personal Property Tax.	•		□No
	9. Name and Address of Current				10. Name and Address of New	Registered /	Agent	
			8	1 Name	•			
	IINN, DONALD		8	2 Street Add	ress (P.O. Box Number is Not Accep	table)		
1	BANKS RD		٦	2 Stieet Add	mass (r.o. box rumber is riot riose)			
-	E 208		ē	3				
MAR	GATE FL 33063	•		4 City			85 Zip C	ode
				1		FL		
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute	s, the abo	ve-named con	poration submits this statement for th	e purpose of	changing its	registered
office or n	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was au ions of, Section 607.0505, Flori	tnorizea t da Statute	y the corporati es.	ion's board of directors. I hereby acco	spr me appon	mnem as reg	Jistered
SIGNATURE	5 la 1 m					3-1	0-99	;
SIGNATURE	Signature, typed or printed name of registered agen-	t and title if applicable. (NOTE:	Registered A	gent signature requir	red when reinstating)	DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO O	FFICERS AN		
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STREET ADDRESS			1.2 NAM				∐ Change	☐ Addition
	3350 BANKS RD., STE 208		1.3 STRE	ET ADDRESS			∐ Change	Addition
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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.