**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000036119

1. Corporation Name NEON IMAGES, INC.

## **FILED** Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90131 028 \*\*\*150.00



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Principal Place	e of Business ;	Mailing Address			_	7 (15)		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2045 N DIXIE HWY 2045 N DIXIE					•				
POMPANO BEACH FL 33080 POMPANO BEAC			)60						
			•				RITE IN THIS	SPACE	
					_	3. Date Incorporated or Qualifer 05/17/1993	a 		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		<u> </u>	plied For
21		26			65-0414012			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75		
22		27					Fee Re		
City & State		City & State			6. Election Campaign Financing		\$5.00		
23	· · · · · · · · · · · · · · · · · · ·	28 .				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip		ountry		8. This corporation owes the cu	rrent year Inta	ingible □Yes	□No
24	25	29	30		-	Personal Property Tax.  10. Name and Address of New	Pagistared		
_	9. Name and Address of Current	t Registered Agent		81	Name	10. Name and Address of New	Kedistered	4gent	
IAM	BERT, JANE L			"	Hame	: '			
	S N DIXIE HWY			82	Street Addre	dress (P.O. Box Number is Not Acceptable)			
	IPANO BEACH FL 33060			83	-	<u></u>	·		
		•		03					}
				84	City		FL	85 Zip	Code
	4.0		4 4	- above	named some	aration cubmits this statement for th			
office or 6	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	of Florida. Such change was	authoriz	י עס ספי	tne corporatio	oration submits this statement for th on's board of directors. I hereby acc	ept the appoir	changing its itment as re	registered gistered
office or 6	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligat	of Florida. Such change was	authoriz	י עס ספי	tne corporatio	oration submits this statement for th n's board of directors. I hereby acc	ept the appoir	changing its atment as re	gistered
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CITY-ST-ZIP

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 arn 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.