PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300036147

## FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90036 021 \*\*\*150.00

LUPO &	LYNCH, INC.								
Principal Place	e of Business	Mailing Address			<u> </u>	I MOTI MATERIAL I DE PORTI CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE L	II AANIS BAIRI ABSBB	I ALLO DILOR JUBIL D	
101 FRONTON BLVD DANIA FL 33004  101 FRONTON BLVD DANIA FL 33004						DO NOT WRITE IN THIS SPACE			
					3 Date I	ncorporated or Qualit		GI AGE	
					1 **	9/1993			
2. Principal Place of Business 2a. Mailing Address					4. FEI N			Apı	plied For
21 (0) F	RONTON BLVD	26 101 FRONTO	E ICI FRONTON BLVD			411422		No	t Applicable
Suite, Apt.		Suite, Apt. #, etc.				ate of Status Desired	ı 🗆	\$8.75 A	
City & State	9	City & State			& Flection	on Campaign Financi	na 🗕	\$5.00	May Be
23 DANIA		·	JCH,	FL		Fund Contribution	"a 🗆	Added to	
Zip	Country	Zip	Country		8. This c	orporation owes the	current year Int	angible	_
24 3300	4 25 U.SA	29 33004 3	30 <i>U</i>	SA_		nal Property Tax.			□No
	9. Name and Address of Curren				10. Name	and Address of Ne	w Registered	Agent	
			81	Name LUPC	STE	PHEN J.		•	
LUPO, STEPHEN J					dress (P.O. Bo	x Number is Not Acc	eptable)		
101 FRONTON BLVD				101	FRONT	ON RLUD	)		
UAN	IA FL 33004		83						
			84	City				85 Zip C	Code
				I DANI	A BEA	CH ,	<u> </u>		5004
office or reagent. I a	to the provisions of Sections 607.050 egistered a set, or both, in the State m familiar and accept the obligat	2 and 607.1508, Florida Statutes of Florida. Such change was autition: of, Section 607.0505, Florid	thorized by ta Statutes	the corpora	rporation subm ition's board of	directors. I hereby ac	ccept the appoi	ntment as reg	gistered
SIGNATURE		Ten Kings Moto C	Ingistered Ace	at examples requi	ired when reinstating		,ATE		
	Signature, sped or printed name of re ered age	D DIRECTORS	13.	ii signature requ		ONS/CHANGES TO		ID DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		7100111	0,10,0,0,0,0	51,7,000,100,10	☐ Change	Addition
NAME	Lupo, stephen j		1.2 NAME						
STREET ADDRESS	248 NE 1ST ST		1.3 STREE	TADDRESS 2	248 NE	ist of			
CITY-ST-ZIP	DANIA FL 33004		1.4 CITY-S				L 330	04	
TITLE			2.1 TITLE		, , , ,			Change	Addition
NAME			2.2 NAME		,				
STREET ADDRESS	132 SE 3RD AVE		2.3 STREE	TADDRESS	32 SE	3 AVE			
CITY-ST-ZIP	DANIA FL 33004		2. 4 CITY-5	١,		BEACH .	#Z 33	004	
TITLE		☐ DELETE	3.1 TITLE			<del></del>		☐ Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS				,	
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-ZIP			4.4 CMY-S	T-ZIP				Channa	C Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME			- *-		☐ Change	Addition
NAMÉ				T ADDRESS		,			
STREET ADDRESS								•	
CITY-ST-ZIP		☐ DELETE	5.4 CITY-S 6.1 TITLE	1-211				☐ Change	Addition
TITLE			6.2 NAME					change	
NAME				T ADDRESS			•		
STREET ADDRESS									
CITY-ST-ZIP			6.4 CITY-S	1-21					

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 or parattachment with an address, with all other like empowered.

**SIGNATURE:** 

GNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

01 / 64 / 99 (954) 926 - 7775 Daylarte Phone # R2E034 (11/98)