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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P93000054365**1. Corporation Name

BRUCE F. IDEN TRUSTEE, INC.

Principal Place of Business Mailing Address			ess					idios didi co de a		ai b alla bidaa ihii	Dilla Bill iddi
2100 PONCE DE LEON BLVD		•	2100 PONCE DE LEON BLVD			1				•	
SUITE 600		SUITE 600	SUITE 600			1	DO NOT WRITE IN THIS SPACE				
MIAMI FL 33134		MIAMI FL 3313	MIAMI FL 33134			}	3. Date Incorporated or Qualifed				
						1	07/30/1993	Cu or Quanto	•		1
2 Principal P	ace of Business	2a. Mailing A	ddress				4. FEI Number	<u> </u>		A	oplied For
21	ace of Basilious	26				1	65-0427184	i		· 	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifcate of Sta			+	Additional
22		27	<u> </u>				5. Cermone of Su	Blus Desired	سيا	Fee R	equired
City & State		City & Sta	City & State				6. Election Campa	aign Financing			May Be
23		28					Trust Fund Con				to Fees
Zip	Country	Zîp		Countr	У		8. This corporation		rent year		Пы.
24	25	29	30	0			Personal Prope		Panintara	☐ Yes	□No
	9. Name and Address of C	urrent Registered Age	ent	8	4 Na	me	10. Name and Add	dress of New	Registere	d Agent	
IDEN	I, BRUCE F				' 'Ne					- <u>-</u> -	****
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	Al FL 33134			"	3						
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this fling 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 type 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 of trustee of powered 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 appears with all other like empowered.

SIGNATURE: