FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Jun 08, 1999 8:00 am Secretary of State

06-08-1999 90015 030 ***550.00

DOCUMENT #	P93000056009		
RESTORE - RENEW	INC.		A 100 A

Mailing Address 5861 SW 8TH ST.

5861 SW 8TH ST. PLANTATION FL 33317	5861 SW 8TH ST. PLANTATION FL 3331 <i>7</i>							
PERMITTION IE 00017			DO NOT WRITE IN THIS SPACE					
				3. Date Incorporated or Qualifed 08/06/1993				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	A	pplied For			
21	26			65-0426312	N	ot Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional		
22	27			5. Certifcate of Status Desired		equired		
City & State	City & State			6. Election Campaign Financing		May Be		
23	28			Trust Fund Contribution Added to Fees				
Zip Country	Zip Country			8. This corporation owes the current year Intangible				
24 25				Personal Property Tax.				
9. Name and Address of Current	Registered Agent	-		10. Name and Address of New Registered A	gent			
WEIGE DICHARD		81	Name			ļ		
WEISS, RICHARD 5861 SW 8TH ST.		82 Street Addr		ess (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33317		83						
PLANTATION PL 33517		84			T-1-			
			City	FL		Code		
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation 	í Florida. Such change was autho	rized by	the corporatio	oration submits this statement for the purpose of con's board of directors. I hereby accept the appoint	hanging it ment as n	s registered egistered		
SIGNATURE				d when reinstatura) DATE				
Signature, typed or printed name of registered agent i			t signature required	ADDITIONS/CHANGES TO OFFICERS AND	NIDECT	OPS IN 12		
12. OFFICERS AND		13.		ADDITIONS/CHANGES TO OTTICERS AND	Change	Addition		
TITLE PT	_	1.2 NAME						
NAME WEISS, CAROL						Į.		
STREET ADDRESS 5861 SW 8TH ST.			ADDRESS			,		
CITY-ST-ZIP PLANTATION FL 33317	☐ DELETE	1.4 CITY-S 2.1 TITLE	1-214	<u></u>	Change	[Addition		
- To								
FOOL ON OTH OT		2.2 NAME						
STREET SERVICES		2.3 STREET	1					
CITY-ST-ZIP PLANTATION FL 33317		2.4 CITY-5	ST-ZIP		Change	Addition		
TITLE		3.1 TITLE						
NAME		3.2 NAME	r ADDOEGO					
STREET ADDRESS		3.3 STREE						
CITY-ST-ZIP		3.4 CITY-S	11-219		Change	Addition		
TITLE		4.1 TILE						
NAME			T ADDRESS					
STREET ADORESS		4.3 STREE	1			1		
CITY-ST-ZIP	☐ DELETE	4.4 CITY-S 5.1 TITLE	1-414		Change	Addition		
TITLE		5.2 NAME			·9-			
NAME		5.3 STREE	CADORESS					
STREET ADDRESS		5.4 CITY-S						
CITY-ST-ZIP		6.1 TITLE			Change	Addition		
TITLE	C.1 0 2 C C 1 D	6.2 NAME	Ì					
NAME			T ADDRESS			Ì		
STREET ADDRESS		6.4 CITY-S				ļ		
CITY-ST-ZIP		na LHY-S	1-415					

4. Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Fitting Certify that the 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

and Weiss

5-10-99 ate 754 792-808 Daytime Phone #