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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **P93000058131** 1. Corporation Name

FILED Feb 15, 1999 8:00 am Secretary of State 02-15-1999 90001 031 ***150.00

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Principal Place	of Business	Mailing Address		<u></u>	I (\$00/\$-80 tin (\$100 till) sout ook to onti	[}B B B B B B B B B B B	11101 1101 1001	
18761 NE BISCAYNE BLVD		18761 NE BISCAYNE BLVD						
AVENTURA FL 33180		AVENTURA FL 33180		DO NOT WRITE IN T	HIS SPACE			
					3. Date Incorporated or Qualifed	IIIO OI AOL		
					08/16/1993			
		2a. Mailing Address			4. FEI Number	· Ap	plied For	
2. Principal Pl	ace of Business	— T			65-0434106		t Applicable	¥ 1.7
21		Suite, Apt. #, etc.				\$8.75 A	Additional	7
Suite, Apt. :	#, etc.	27			5. Certifcate of Status Desired	Fee Re	quired	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
— ·		28			Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes the current year	r Intangible	_	
	25	29	30		Personal Property Tax.	Yes	□No	
24	9. Name and Address of Curre				10. Name and Address of New Registe	red Agent		
		3 7	8	1 Name			ļ	
LAVEUF, BERNARD 20820 NE 23 AVENUE				2 Street Ad	ddress (P.O. Box Number is Not Acceptable)			
	AMI BEACH FL 33180		8	13			13.51.11	
14 1916	AMI DENOTITE GOTOG					na la	13 At 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			8	City		FL 85 Zip	Code /	
			I .				registered	
<u> </u>	of Castions 607.050	02 and 607 1508 Florida Statute	s the abo	ove-named co	orporation submits this statement for the purpos	e of changing its	registered	
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607.1508, Florida Statute of Florida. Such change was au	s, the about	ove-named co by the corpora	orporation submits this statement for the purpos ation's board of directors. I hereby accept the a	e of changing its ppointment as re	gistered	
11. Pursuant office or ragent. I a	to the provisions of Sections 607.056 registered agent, or both, in the State im familiar with, and accept the obligations.	02 and 607.1508, Florida Statute of Florida. Such change was au ations of, Section 607.0505, Flori	s, the about thorized tida Statut	ove-named co by the corpora es.	orporation submits this statement for the purpos ation's board of directors. I hereby accept the a	e of changing its ppointment as re	gistered	
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agent. 1 a	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:				E S AND DIRECTO	DRS IN 12	4/00)
SIGNATURE	Signature, typed or printed name of registered age OFFICERS A	adona di, dodicii do i isaaci, i isaa	Registered A	gent signature requ	uired when reinstating) DAY ADDITIONS/CHANGES TO OFFICER	Ē		(44/08)
SIGNATURE 12.	Signature, typed or printed name of registered age OFFICERS AI	ent and title if applicable. (NOTE: ND DIRECTORS	Registered A	gent signature requ	uired when reinstating) DAT	E S AND DIRECTO	DRS IN 12	(44/09)
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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.

SIGNATURE: