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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000068215 1. Corporation Name

INDEPENDENT C INC

Principal Place of Business
701 E. COMMERICAL BLVD. SUPPE 300 FORT LAUDERDALE FL 33334
SLUPE 300
FORT LAUDERDALE FL 33334

## Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90036 023 \*\*\*150.00



Principal Place	e of Business	Mailing Address						
701 E. COMME	RICAL BLVD.	P.O. BOX 100009						
SUITE 300		FT. LAUDERDALE FL 33310						
FORT LAUDERDALE FL 33334				DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or C	Qualifed		}
					09/30/1993			· \
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	***	App	olied For
					65-0441773		Not	Applicable
		Suite, Apt. #, etc.			00 044 1770		\$8.75 A	
Suite, Apt. #, etc.		<b>⊢</b>	¬ ~ ~ ~ ~ ~ .		5. Certifcate of Status De	sired .	Fee Red	
27								
City & State		City & State		6. Election Campaign Fin	- 11	\$5.00	, ,	
23 Ft L	auderdale. FL	28		Trust Fund Contributio	<u> </u>	Added to	Fees	
Žip	Country	Zip	Country	1	`8. This corporation owes	the current year In		1
24 332	508 25 USA	29 3	0		Personal Property Tax		Yes	□No
<u>- حرب احد</u>	9. Name and Address of Current		•		10. Name and Address of	f New Registered	Agent	
<del></del>			81	Name				
TOT	URA. DOUGLAS B		L					
<del>-</del>			82	Street Ad	ldress (P.O. Box Number is Not			
701 E. COMMERICAL BLVD.				5/	10 M. Fear	n Hidur	<u>nan</u>	
	TE 300		83	3	-	•	. 0	
FT. L	Lauderdale fl 33334		L.	0.00			85 Zip C	'ode
			84		t. Landercale	FL	-    32	508 I
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abov	e-named co	rporation submits this statemen	t for the purpose o	f changing its	registered
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of the familiar with, and accept the obligations.	Florida, Such change was auti	norizea by	r the corpora	ation's board of directors, Friere	by accept the appr	mittion to res	Jistorou
		JIS 01, Section our voos, Florid	la Statute:	S.				
	N Milder & MY	his or, section 607,0303, Fiolio				<b>a</b> .	19,90	<b>ત</b> (
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SIGNATURE	X / Sugar out	and title if applicable. (NOTE: R	$\rho \omega \sigma$	101	/\tau	DATE.	18.90	1
SIGNATURE	Signature, typed or printed name of registered egent OFFICERS AND	and title if applicable. (NOTE: R	egistered Age	101	uired when reinstating)	DATE.	18.90	1
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered eigent OFFICERS AND	and title if applicable. (NOTE: R	egistered Age 13.	nt signature requ	uired when reinstating)	DATE.	ND DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME	Signiturie, typed or printed pame of registered eigent OFFICERS AND DP TOTURA, DOUGLAS B	and title if applicable. (NOTE: R	13. 1.1 TITLE 1.2 NAME	nt signature requ	uired when reinstating)	DATE.	ND DIRECTO	RS IN 12
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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. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE: \( \)