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 # P93000086519

1. Corporation Name

HOUSE	& PHUPEHTY SERVICES, I	INC.					
Principal Place of Business Mailing Address							
3417 PALLADIN CIRCLE P O BOX 810754						•	
DEERFIELD BEACH FL 33442 BOCA RATON FL 33481				the state of the s		_ Park of the	
		US			3. Date Incorporated or Qualifed	IN THIS SPACE	<u> </u>
					12/10/1993		
2 Principal 8	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21 26					65-0457844	<u> </u>	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.7	75 Additional
22 27					5. Certifcate of Status Desired	\$ ·	e Required
City & State City & State			(Marie area)		6. Election Campaign Financing	\$5.	.00 May Be
23 28					Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Country		8. This corporation owes the curren	t year Intangible	
24	25		30		Personal Property Tax.	☐ Yes	□ No
	9. Name and Address of Currer	nt Registered Agent	81 1	1	10. Name and Address of New Reg	jistered Agent	
SUC	GERMAN, IRWIN	e Augent gertrette in der eine eine eine eine eine eine eine ei	01 1	Name			
-3417-PALLADIN CIRCLE				Street Addre	ess (P.O. Box Number is Not Acceptable	e)	
DEERFIELD BEACH FL 33442			83				5000 000 00 00 00 00 00 00 00 00 00 00 0
			03				
	•		84 (City		85	Zip Code
dd Directions	to the provisions of Sections 607 050	22 and 607 1509. Florido Statuto	n the chaus n	amad same	pration submits this statement for the pu	FL o	a its registered
l office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au	ithorized by the	corporation	n's board of directors. I hereby accept t	he appointment a	as registered
SIGNATURE							
·	Signature, typed or printed name of registered age			nature required	when reinstating) > ''	DATE	
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRE	
TITLE	SUGERMAN, IRWIN	C. OCTEVE	1.1 TITLE	1		Li Cila	nge L Addition
NAME	A A T DALL ADILL OUDGE		1.2 NAME				
STREET ADDRESS	DEEDELD DEACH EL 20440		1.3 STREET AD				
TITLE	ST DECRIPED BEACH PE 33442	☐ DELETE	1.4 CITY-ST-ZI	P .		☐ Chai	inge Addition
NAME	STARK, MARILYN	- OCCETE	2.1 IIILE		· •	Cital	ilde [1] Yadibou
STREET ADDRESS	ALLE BALLADIN OIDOLE			DDECC			
-	DEERFIELD BEACH FL 33442		2.3 STREET AD		-	-	
TITLE	DEETH ICED BEACHT E 30442	□ DELETE	3.1 TITLE	P		Cha	nge
NAME			3.2 NAME		•	_ 5	5 mm - 100.0001
STREET ADDRESS		•	3.3 STREET AD	ORESS			
CITY-ST-ZIP			3.4. CITY-ST-ZI	- 1		5 13 2 2 1	
TITLE		☐ DELETE	4.1 TITLE	" 		Cha	nge Addition
NAME			4, 2 NAME		•	·. : 🔻	
STREET ADDRESS			4.3 STREET AD	DRESS	in the second of		
CITY-ST-ZIP		•	4.4 CITY-ST-ZI	- 1	· ·	er en	
TITLE) DELETE	5.1 TITLE			☐ Char	nge
NAME			5.2 NAME		•		•
STREET ADDRESS			5.3 STREET ADI	DRESS			
CITY-ST-ZIP	}		5.4 CITY-ST-ZII	•			
TITLE	Statute Business I	☐ DELETE	6.1 TITLE			☐ Char	nge Addition
NAME			6.2 NAME	1			
STREET ADDRESS			6.3 STREET ADI	DRESS			

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 troe 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 on 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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Jan 22, 1999 8:00am

Secretary of State 01-22-1999 90069 026 ***150.00