## 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 # P93000087415

PPI CONCESSION SERVICES, INC.

Principal Place	of Business	Mailing Address							
7100 W COMME	RCIAL BLVD	7100 W. COMMERCIAL BLV	D						
SUITE 106		SUITE 106		,	DO NO	OT WRITE IN THIS	SPACE		
FT LAUDERDALE FL 33319		FORT LAUDERDALE FL 33319			3. Date Incorporated or Qualified				
US		US			** - *	damod		1	
				. <u> </u>	12/22/1993 4. FEI Number	<del></del> _	1 1 1 1	lied For	
2. Principal Pla	ace of Business	2a. Mailing Address			==		L	Applicable	301.00
21		26			65-0457074			Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status De	sired :	<b>\$8.75</b> A		
22		27				<u> </u>	<del></del>	<del>'</del>	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution	n '-	Added to	Fees	
Zip	Country	Zip	Country	у	8. This corporation owes	the current year Int	angible	_	
24	25	29	30		Personal Property Tax			□No ,	
	9. Name and Address of Curren				10. Name and Address o	f New Registered	Agent_		
	3. Nume and records	:	81	Name				*	
PANO	OFF, IRENE				io o o o li milioni in Nat	Aatable)			
	16 DINAR TRAIL		82	2 Street Addi	ress (P.O. Box Number is Not	Acceptable)			•
_	A RATON FL 33433		83	3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E SE SEPTEMBRISH	15 2 2 3 4 2 4 2	115-11-12	
500	A RATON IL 30400		0,	1	· · · · · · · · · · · · · · · · · · ·		<b>提出建制。</b>	129 (158)	
			84	4 City	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FL	85 Zip'C	ode " "	
							<u> </u>		
11 Purcuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statute	es, the above	ve-named corp	poration submits this statement	t for the purpose of by accept the appoi	changing its	registered	
	anistored agent or both in the State	of Florida. Such change was a			ION'S DOM'D OF DIRECTORS. I TICHO	by doodpraid appr		·	
office or re	egistered agent, or both, in the otale	tions of Section 607,0505, Flo	ida Statute	s.					
office or re agent. I a	m familiar with, and accept the obligation	tions of, Section 607.0505, Flo	rida Statute	is.			٠ .		
agent. I a	m familiar with, and accept the obliga	mons of, Section contracts, re-	100 0101012		red when reinstating)	DATE			ά
signature	M ramitiar with, and accept the onligation of registered ager	nt and title if applicable. (NOTE	100 0101012			DATE	ND DIRECTO	RS IN 12	1/98)
SIGNATURE	M familiar with, and accept the colligation of signature, typed or printed name of registered ager  OFFICERS AN	mons of, Section contracts, re-	Registered Age	ent signature require	red when reinstating)	DATE S TO OFFICERS AN			(41/98)
SIGNATURE  12.	Signature, typed or printed name of registered ager  OFFICERS AN	nt and title if applicable. (NOTE	Registered Age	ent signature require	ed when reinstating)  ADDITIONS/CHANGES	DATE	ND DIRECTO	RS IN 12	34/(11/98)
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE	nt and title if applicable. (NOTE	13. 1.1 TITLE 1.2 NAME	ent signature require	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	ND DIRECTO	RS IN 12	E034(11/98)
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL	nt and title if applicable. (NOTE	13. 1.1 TITLE 1.2 NAME	ent signature require	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	ND DIRECTO	RS IN 12	DOE034(41/98)
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433	nt and title if applicable. (NOTE  ID DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY-	ent signature require  ET ADDRESS ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	ND DIRECTO	RS IN 12	CD2E034(11/98)
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD	nt and title if applicable. (NOTE	13. 1.1 YITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE	ent signature require	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	ND DIRECTO	RS IN 12	CD2E034/(11/98)
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433	nt and title if applicable. (NOTE  ID DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature require  ET ADDRESS ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	ND DIRECTO	RS IN 12	CD2E034/(11/98)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL	nt and title if applicable. (NOTE  ID DIRECTORS	Registered Age   13.   1.1 TITLE   1.2 NAME   1.3 STREI   1.4 CITY-   2.1 TITLE   2.2 NAME   2.3 STREI   2.3 STR	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	ND DIRECTO	RS IN 12	CD2E034/(11/98)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A	nt and title if applicable. (NOTE ID DIRECTORS DELETE	Registered Age   13.   1.1 TITLE   1.2 NAME   1.3 STREI   1.4 CITY-   2.1 TITLE   2.2 NAME   2.3 STREI   2.4 CITY	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	DD DIRECTO	RS IN 12 Addition	CD2E034/(11/98)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL	nt and title if applicable. (NOTE  ID DIRECTORS	Registered Age   13.   1.1 TITLE   1.2 NAME   1.3 STREI   1.4 CITY-   2.1 TITLE   2.2 NAME   2.3 STREI   2.3 STR	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	ND DIRECTO	RS IN 12	CD2E034 (11/98)
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL	nt and title if applicable. (NOTE ID DIRECTORS DELETE	Registered Age   13.   1.1 TITLE   1.2 NAME   1.3 STREI   1.4 CITY-   2.1 TITLE   2.2 NAME   2.3 STREI   2.4 CITY	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	DD DIRECTO	RS IN 12 Addition	CD2E034/(11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL	nt and title if applicable. (NOTE ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	DATE S TO OFFICERS AN	DD DIRECTO	RS IN 12 Addition	CP2E034/(11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL	nt and title if applicable. (NOTE ID DIRECTORS DELETE	13. 1.1 YITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS - ST-ZIP  ET ADDRESS	ed when reinstating)  ADDITIONS/CHANGES	TO OFFICERS AN	ND DIRECTO Change Change	RS IN 12 Addition Addition	CD2E034/(11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL	nt and stile if applicable. (NOTE ID DIRECTORS DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  EET ADDRESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	TO OFFICERS AN	DD DIRECTO	RS IN 12 Addition Addition	CD2En34/(11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL	nt and title if applicable. (NOTE ID DIRECTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	TO OFFICERS AN	ND DIRECTO Change Change	RS IN 12 Addition Addition	CD2E034/(11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and stile if applicable. (NOTE ID DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADORESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	TO OFFICERS AN	ND DIRECTO Change Change	RS IN 12 Addition Addition	CD2E034/(41/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and stile if applicable. (NOTE ID DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS	ed when reinstating)  ADDITIONS/CHANGES	TO OFFICERS AN	ND DIRECTO Change Change	RS IN 12 Addition Addition	CD2E034/(11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and title if applicable. (NOTE ID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY-	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES	TO OFFICERS AN	DDIRECTO Change Change Change	RS IN 12 Addition Addition Addition	CD2ED34 (11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and stile if applicable. (NOTE ID DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.1 TITLE 5.1 TITLE	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES	TO OFFICERS AN	ND DIRECTO Change Change	RS IN 12 Addition Addition	CD2E034/(11/98)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and title if applicable. (NOTE ID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADORESS	ed when reinstating)  ADDITIONS/CHANGES	TO OFFICERS AN	DDIRECTO Change Change Change	RS IN 12 Addition Addition Addition	(41/08)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and title if applicable. (NOTE ID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS	ADDITIONS/CHANGES	TO OFFICERS AN	DDIRECTO Change Change Change	RS IN 12 Addition Addition Addition	CDDED34/(11/98)
Agent, Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and title if applicable. (NOTE ID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES	TO OFFICERS AN	DDIRECTO Change Change Change	Addition  Addition  Addition	CDSED34/(11/08)
AGENT LAIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	nt and title if applicable. (NOTE ID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE	ent signature require  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES	TO OFFICERS AN	DDIRECTO Change Change Change	RS IN 12 Addition Addition Addition	CD2ED34/(1798)
Agent. Fair SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	In and title if applicable. (NOTE ID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS	ADDITIONS/CHANGES	TO OFFICERS AN	DDIRECTO Change Change Change	Addition  Addition  Addition	CD2E034/(11/08)
AGENT LAIR SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN VD PANOFF, IRENE 20846 DINAR TRAIL BOCA RATON FL 33433 PD PANOFF, WILLIAM A 20846 DINAR TRAIL BOCA RATON FL 33433	In and title if applicable. (NOTE ID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 6.1 TITLE 6.2 NAMI 6.1 TITLE 6.2 NAMI	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS	ADDITIONS/CHANGES	TO OFFICERS AN	DDIRECTO Change Change Change	Addition  Addition  Addition	CD2E034/(1/08)

SIGNATURE:

CITY-ST-ZIP

6.4 CITY-ST-ZIP

**FILED** 

Feb 16, 1999 8:00 am Secretary of State

02-16-1999 90024 018 \*\*\*150.00

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 training 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 attached with an address, with all other like empowered.