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 # P9400000821

1600 PENNSYLVANIA AVENUE CORP.

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90039 046 ***150.00



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Principal Place of Business Mailing Address									
1228 ALTON RD. 1228 ALTON RD.									
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139					DO NOT WRITE IN THIS SPACE				
					3. Date incorporated or Qualifed				
					01/03/1994				
2 Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		A	oplied For	
21		- ·	26		65-0464425		No	ot Applicable	
Suite, Apt. #, etc.			Suite, Apt #, etc				\$8.75	Additional	
22		· ·	27		Certificate of Status Desired	l_J	Fee R	equired	
City & State			City & State		6. Election Campaign Financing		\$5.00	Мау Ве	
23	<u>↑</u>				Trust Fund Contribution			to Fees	
Zip	Country	Zip	Country		8. This corporation owes the curr	ent year Inta	ngible		
24	25	29 36	D		Personal Property Tax		Yes	[XLNo	
	11	of Current Registered Agent			10. Name and Address of New F	Registered A	Agent		
		· · · · · · · · · · · · · · · · · · ·	1 1	Name					
ROSE, LEO JR.			00	James	Resnick ress (P.O. Box Number is Not Accepta	hla)			
1 SE	3RD AVE		82		Alton_Road	iDi¢)			
STE 2400			83	_1,4,4,0,	ALCOILROAU				
MIAN	VII BEACH FL 33131		L			_			
			84	City	D 1	FL	1 1	Code	
11 Dumin	to the archivens of Sections	607 0502 and 607 1508, Florida Statutes	the about	named corn	_Beach	nurnose of	hanging its	3.1.3.9	
1 office or r	enistered Magnit for both in t	he State of Florida. Such change was auff	norizea by tr	ne corporation	on's board of directors. I hereby accep	the appoin	tment as re	egistered	
agent. La	m familiar with and accept th	ne obligations of, Section 607.0000, Floho	a Statutes						
SIGNATURE		TIMES RESHLIK	on Porcet America	LION ALITA CINILITA	of Ahen reinstation	<u>-7]_[</u> <u> </u>	<u> 44</u>		_
12.		gistered agent and title if applicable (NOTE Ri CERS AND DIRECTORS	13.	aquanan: re-pair	ADDITIONS/CHANGES TO OF	FICERS AN	DIRECTO	ORS IN 12	ç
TITLE	PD	Z DELETE	· · [1*LE	ם			X] Change	Addition	1
NAME	RESNICK, ABE		12 NAME	-	_		•		-
STREET ADDRESS	1228 ALTON RD.		13 STREET A		esnick, Sara				ç
	MIAMI BEACH FL		1 4 CITY-ST-	+	228 Alton Rd.	22122		ļ	Š
CITY-ST-ZIP	SD SD	☐ DELETE	21 TITLE		li-ami—Beach,—F-1—	3-3-1-39-	Change	Addition	Č
TITLE		(L) DECE	2.2 NAME						
NAME	RESNICK, JAMES		1						
STREET ADDRESS			23STREET A	1					
CITY-ST-ZIP	MIAMI BEACH FL	☐ DELETE	2.4 GITY - ST-	ZIP I			Change	Addition	
TITLE		[_] Decei=	3 : TIFLE	!					
NAME			3.2 NAME					Ì	İ
STREET ADDRESS			33 STREET A						
CITY-ST-ZIP			34 CITY-ST	ZIP	<u> </u>	_	☐ Change	Addition	
TITLE		☐ DELETE	4 1 TITLE				□ Change	L.J Addition	
NAME			4 2 NAME					ļ	
STREET ADDRESS			43 STREET A	ADDRESS				1	
CITY-ST-ZIP			44 CITY ST.	ZIP		_			
TITLE		DELETE	5: TITLE				☐ Change	Addition	
NAME .			52 NAME						
STREET ADDRESS			53 STREET A	DDRESS					
CITY-ST-ZIP			54 CITY-ST-	Z.Þ		· - · · · · · · · · · · · · · · · 			
TITLE		☐ DELETE	61 TITLE				Cnange	Addition	
NAME			6.2 NAME	i					
STREET ADDRESS:			63STREET A	DORESS				ļ	
CITY-ST-ZIP			6.4 CITY - ST-	ZIP					

14. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplymental 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 acceiver 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 all algorithms with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-99

305-6734941