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PROFIT ... CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400002079

1. Corporation Name

ADDICTIC DECICAL COLLECE INC.

Annoni	C DESIGN SOUNCE, INC.							
Principal Place	e of Business .	Mailing Address				IIT KOHU ONTÅL DI		
1501 VAN BUREN ST 1501 VAN BUREN ST								
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020								
US US						DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 01/10/1994			
Principal Place of Business 2a. Mailing Address					4. FEI Number			plied For
21 26			·		65-0459236			t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22				5. Certifcate of Status Desired		\$8.75 A		
City & State City & State				2. 2	6. Election Campaign Financing		\$5.00	May Be
23 28					Trust Fund Contribution		Added t	o Fees
Zip Country Zip			Country		8. This corporation owes the curre			ا - ا ب
24	<u></u>	29 30			Personal Property Tax.		☐ Yes	No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered A	gent	
THE	ZAROV LOUISE E		81	Name				
Tudzarov, Louise e 345 w oakland park blyd			82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		_
FT LAUDERDALE FL 33311			1		, 			
, FI L	AODENDALE I E 30011		83					
	,		84	City		FL	85 Zip 0	Code
office or a	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligat	nt Florida. Such change was autho	mzen nv	the comoration	pration submits this statement for the n's board of directors. I hereby accep	purpose of c t the appoint	hanging its iment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable (NOTE: Reg	stered Agen	nt signature required	when reinstating)	- DATE	, :	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE				Change	☐ Addition
NAME	RAMSEY, JANE D	•	1.2 NAME	1				
STREET ADDRESS	1501 VAN BUREN ST		1.3 STREET	ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-S	T-ZIP				
TITLE	D	☐ DELETE 2.1 TIT					Change	Addition
NAME	RAMSEY, JAMES G 222N		2.2 NAME					Ì
STREET ADDRESS			2.3 STREET	TADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 240		2. 4 CITY-S	ST-ZIP				
TITLE	☐ DELETE 3.1 TI		3.1 TITLE				☐ Change	Addition
NAME	The second secon	,, <u>-</u>	.3.2 NAME		بيديد دي	. 		-
STREET ADDRESS			3.3 STREET	TADDRESS				}
CITY-ST-ZIP			3.4. CITY- S	ST- ZIP				
TITLE		DELETE	4.1 TITLE				☐ Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	T ADDRESS				ļ
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE '		DELETE 5.1111					Change	☐ Addition
NAME .			5.2 NAME					ŀ
STREET ADDRESS	· .	• • •	0.21.21.2					
CITY-ST-ZIP				TADORESS		. •	•	
		· · · · ·	5.3 STREET 5.4 CITY-S					
TITLE		☐ DELETE	5.3 STREET				Change	Addition

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034.(1.1/98)