## 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 # P9400006865 1. Corporation Name

FUTURA GROUP INC.

STREET ADDRESS

## Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90183 021 \*\*\*150.00



| •  |  | •              |   |  |  |                               | Ш                                 |                                    |   |
|--|--|----------------|---|--|--|-------------------------------|-----------------------------------|------------------------------------|---|
| Principal Place of Business Mailing Address  |  |                |   |  |  | 00111                         |                                   | 18119 81191 8111 1881              |   |
| 2401 S MIAMI AVE<br>MIAMI FL 33129<br>JS   | 2401 S MIAMI AVE<br>MIAMI FL 33129<br>US |                |   |  | DO NOT WRITE IN THIS SPACE   |                               |                                   |                                    |   |
|  |  |                |   |  | 3. Date incorporated or Qualifed 01/19/1994  |                               |                                   |                                    |   |
| 2. Principal Place of Business 2a. Mailing Address   |  | 3              |   |  | 4. FEI Number  |                               | L                                 | Applied For                        | _ |
| 26   |  |                |   |  | 65-05027 <u>96</u>   |                               | $\perp$                           | Not Applicable                     |   |
| Suite, Apt. #, etc. Suite, Apt. #, etc.  |  |                |   |  | 5. Certificate of Status Desired   |                               | \$8.75 Additional<br>Fee Required |                                    |   |
| City & State   | City & State                             |                |   |  | Election Campaign Financing     Trust Fund Contribution                                |                               | \$5.00 May Be<br>Added to Fees    |                                    |   |
| Zip Country 4 · · · 25   | Zip 29 -                                 | Zip Country    |   |  | 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No |                               |                                   |                                    |   |
| 9. Name and Address of Current Registered Agent  |  |                | 10. Name and Address of New Registered Agent      |  |  |                               |                                   |                                    | _ |
| DINTER, HEINZ<br>2401 S MIAMI AVENUE<br>MIAMI FL 33129   |  |                | 81  | Name   |  |                               |                                   |                                    |   |
|  |  | 82             |   | Street Address (P.O. Box Number is Not Acceptable) |  |                               |                                   |                                    |   |
|  |  |                | 83  |  |  |                               |                                   |                                    |   |
|  | _  |                | 84  |  |  | FL                            |                                   | Zip Code                           | _ |
| <ol> <li>Pursuant to the provisions of Sections 607.0         office or registered agent, or both, in the Stagent. I am familiar with, and accept the ob-</li> </ol> | ate of Florida. Such change              | was authorized | d by  | the corporation                                    | oration submits this statement for the pun's board of directors. I hereby accept       | irpose of cha<br>he appointme | ngin<br>ent a                     | ig its registered<br>as registered |   |
| SIGNATURE  |  | AIOTE: Di.:    |   | t alamat me engister d                             | ( udoe rejectating)  | DATE                          | <u>.</u>                          |                                    |   |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered  |  |                | Applitions/CHANGES TO DETICES AND DIRECTORS IN 12 |  |  |                               |                                   |                                    |   |
|  |  |                |   |  |  |                               |                                   |                                    |   |

Change ☐ Addition DELETE 1.1 TITLE TITLE DINTER HEINZ 1.2 NAME NAME 2401 S. MAMI AVE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33129 1.4 CITY-ST-ZIP C/TY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 2.1 TITLE DINTER, RUDOLF 2.2 NAME NAME 2401 S. MIAMI AVE 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33129** CITY-ST-ZIP 2.4 CITY-ST-ZIF □ DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS

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

6.4 CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)