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

FILED Mar 03, 1999 8:00 am Secretary of State 03-03-1999 90010 002 ***150.00

DOCUMENT #	P94000008454
Corneration Name	1 0 1000000 10 1

ALEDA CALEC INC

ALEUN S	MLES, INC.					_				
Principal Place	of Business	Mailing Ad	ddress				- r ideriedt its ibili atsit samt nern saut ben		#1(() 0 (#) (90)	
•		10561 GRE	ENBRIAR COURT							
10561 Greenbriar Court 10561 Greenbriar Court Boca Raton FL 33498 Boca Raton FL 33498						}				
							DO NOT WRITE IN THI	S SPACE	₁	
							3. Date Incorporated or Qualifed		}	
							02/02/1994			
2. Principal Pla	ace of Business	2a. Mailin	g Address				4. FEI Number	├	plied For	
:1		26					65-0469181		t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired	\$8.75 A			
2		27								
City & State		City &	State				6. Election Campaign Financing	\$5.00 Added 1		
23		28		Carrata			Trust Fund Contribution		o rees	
Zip	Country	Zip	r:	Country	у		1	his corporation owes the current year Intangible ersonal Property Tax Yes No		
4	25	29	3	0			Personal Property Tax. 10. Name and Address of New Registered			
	9. Name and Address of Cur	rent Registered A	igent	81	1 N	lame	10. Name and Address of New Registerer	Agein		
CODI	PORATION INFORMATION SE	ביייים ואיר		"	` '`	ame				
	HAYS ST.	MADES INC.		82	2 S	treet Addre	ss (P.O. Box Number is Not Acceptable)			
	AHASSEE FL 32301				:					
IALL	ALINOGEE LE 32301			83	3				ļ	
				84	4 C	City		85 Zip (Code	
					_ _		F			
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta π familiar with, and accept the obl	ate of Florida, Sucl	h chande was auti	norized by	v tne	corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as re	gistered	
SIGNATURE							when reinstation) DATE			
	Signature, typed or printed name of registered			-	ent sig	nature required		NO DIRECTO	DS IN 12	
12.		AND DIRECTORS	C) DELETE	13.			ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
TITLE	P		Clactic	ł					_ }	
NAME	GRUBOW, LEDA			1.2 NAME						
STREET ADDRESS	10561 GREENBRIAR COURT	l		13 STRE		1				
CITY-ST-ZIP	BOCA RATON FL 33498		DELETE	1.4 CITY-		- + -		Change	[] Addition	
TITLE			□ occeie	2.1 TITLE		Ì				
NAME				2.2 NAME					ļ	
STREET ADDRESS				2.3 STRE		!			أنجب جيش	
CITY-ST-ZIP	- · · · · · · · · · · · · · · · · · · ·			2.4 CITY		<u> P</u>		Change	Addition	
TITLE			☐ DELETE	3,1 TITLE				Chouguge		
NAME				3.2 NAME			·		ļ	
STREET ADDRESS				3.3 STRE	ET AD(DRESS			\	
CITY-ST-ZIP				34. CITY		IP		Chanes	Addition	
TITLE			☐ DELETE	4.1 TITLE		Į		Change		
NAME				4. 2 NAM					ļ	
STREET ADDRESS				4.3 STRE	ET ADI	DRESS				
CITY-ST-ZIP				4.4 CITY-	ST-Z#	P			- Addition	
TITLE			☐ DELETE	5.1 TITLE				☐ Change	☐ Addition	
NAME				5.2 NAME		{			j	
STREET ADDRESS				5.3 STRE	ET ADI	DRESS				
CITY-ST-ZIP				5.4 CITY-		Р				
TRLE			DELETE	6.1 TITLE	Į.	}		Change	☐ Addition	
NAME				6.2 NAME		[ĵ	
STREET ADDRESS				6.3 STRE	ET AD	DRESS			ļ	
CITY-ST-ZIP	l			6.4 CITY-						
44 bereby c	ertify that the information supplied	with this filing do	es not qualify for t	ne exemr	ntion	stated in S	ection 119.07(3)(i), Florida Statutes. I further of	ertify that the	nformation	

Indicated on this annual report or supplied with this limit does not qualify lot me accrimate in occasion the fact that it is an account 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.

SIGNATURE:

561-488-0506 Daytime Phone #