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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400008630

INDUSTRIAL SHADEPORTS USA INC.

Principal Place of Business Mailing Address					(1991) 991 110 1011 91011 9911 00111 00111 00	*** 25,01 ,0110 91106	****** 9311 1881
1625 SW 1ST WAY		1625 SW 1ST WAY					
C-10		C-10		DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE		
DEERFIELD BCH FL 33441 US		DEERFIELD BCH FL 33441		3. Date Incorporated or Qualifed			
03		00			01/24/1994		
2 Principal Pl	lace of Business	2a, Mailing Address			4. FEI Number	Apt	lied For
	lace of Business	26			65-0464835	Not	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75 A	dditional
22	.,	27		•	5. Certifcate of Status Desired	Fee Re	quired
City & State	8	City & State			6-Election Campaign:Financing	\$5.00	May:Bē≅====
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip		untry	8. This corporation owes the current year Intangible		
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent		104	10. Name and Address of New Register	ed Agent	
1404	OBS, C. D			81 Name			
	S SW 1ST WAY			82 Street A	Address (P.O. Box Number is Not Acceptable)		
C-10							
	rfield fl. 33441			83			
DEEL	NEIGLD FE 33441			84 City	-	85 Zip C	ode
				<u> </u>		of changing its	ragistered
office or r	polistored agent, or both, in the State	of Florida. Such change was	autnonze	a by the corbo	corporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointment as reg	gistered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, F	Iorida Stat	tutes.	·		
SIGNATURE					puired when reinstating) DATE		{
	Signature, typed or printed name of registered age				quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
12.	VP UFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO CITICENS	☐ Change	Addition
TITLE	I	_ bcccic	1.2 N	1		_ •	_
NAME .	JACOBS, DENNIS L						Į
STREET ADDRESS							1
CITY-ST-ZIP	DEERFIELD BCH FL 33441			STREET ADDRESS			
TITLE	1 P	□ DELETE	1.4 C	CITY-ST-ZIP		Change	RS IN 12 Addition
NAME	MOORE CURIETO D	☐ DELETE	1.4 C 2.1 Π	CITY-ST-ZIP		Change	Addition
STREET ADDRESS	JACOBS, CHRISTO D	☐ DELETE	1.4 C 2.1 TI 2.2 N	CITY-ST-ZIP TITLE ,		Change	Addition
	1625 SW 1ST WAY #C-10	☐ DELETE	1.4 C 2.1 TI 2.2 N 2.3 S	CITY-ST-ZIP TITLE NAME STREET ADDRESS	و المعامل المحمد	Change	Addition
CITY-ST-ZIP - TOP			1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C	CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP	The same of the sa	Change	Addition
CITY-ST-ZIP	1625 SW 1ST WAY #C-10	☐ DELETE	1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 TI	CITY-ST-ZIP TITLE JAME STREET ADDRESS CITY-ST-ZIP	و ما المعلق المع	stant a talent	
CITY-ST-ZIP	1625 SW 1ST WAY #C-10		1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N	CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME	و ساده و در المحمد	stant a talent	
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CITY-ST-ZIP-TITLE NAME STREET ADDRESS CITY-ST-ZIP	1625 SW 1ST WAY #C-10	☐ DELETE	1.4 C 2.1 TI 22 N 2.3 S 2.4 C 3.1 TI 3.2 N 3.3 S 3.4 C	CITY-ST-ZIP TITLE LAME STREET ADDRESS CITY-ST-ZIP TITLE LAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	The same of the sa	stant a table	
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CITY-ST-ZIP- TO STATE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1625 SW 1ST WAY #C-10 DEERFIELD BCH FL-33441	☐ DELETE	1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S 3.4 C 4.1 Ti 4.2 N	CITY-ST-ZIP TITLE LAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Change	Addition
CITY-ST-ZIP - TO STATE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1625 SW 1ST WAY #C-10 DEERFIELD BCH FL-33441	☐ DELETE	14C 21TI 22N 23S 24C 31T 32N 33S 34.C 41TI 4.2N	CITY-ST-ZIP TITLE LAME STREET ADDRESS CITY-ST-ZIP TITLE LAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		Change	Addition
CITY-ST-ZIP - TOTAL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1625 SW 1ST WAY #C-10 DEERFIELD BCH FL-33441	☐ DELETE	14C 21TI 22N 23S 24C 31TI 32N 33S 34.C 41TI 42P	CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP		Change	Addition
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CITY-ST-ZIP-TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1625 SW 1ST WAY #C-10 DEERFIELD BCH-FL-33441	☐ DELETE	14C 21TI 22N 23S 24C 31Ti 32N 34.C 4.1TI 4.2P 4.3S 4.4C 5.1TI 52N	CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE WAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE WAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition Addition
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CITY-ST-ZIP-TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1625 SW 1ST WAY #C-10 DEERFIELD BCH-FL-33441	DELETE	14C 21TI 22N 23S 24C 31T 32N 33S 34.C 41TI 4.2N 43S 44C 51TI 52N 53S 54C 61T 62N	CITY-ST-ZIP TITLE JAME STREET ADDRESS CITY-ST-ZIP TITLE JAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE		Change Change	Addition 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 charged, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP