

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
Jun 18, 1999 8:00 am
Secretary of State

06-18-1999 90008 050 ***558.75

DOCUMENT # P94000021867

1. Corporation Name

DEVELOPER - MANAGEMENT ENTERPRISES INC.

Principal Place of Business

20477 LINKS VIEW WAY
BOCA RATON FL 33434
6774 WILLOW WOOD DRIVE
UNIT #1102
BOCA RATON, FL 33434

Mailing Address

Willow Wood
Drive
#1102
Boca Raton FL
33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/22/1994

4. FEI Number

65-0773412

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

KINGSLEY, WILLIAM
20477 LINKS VIEW WAY
BOCA RATON FL 33434

6774 WILLOW WOOD DRIVE
UNIT #1102
BOCA RATON, FL 33434

81. Name

Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PST
NAME KINGSLEY, RITA I
STREET ADDRESS 20477 LINKS VIEW WAY
CITY-ST-ZIP BOCA RATON FL 33434

☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change ☒ Addition ☐
Charman
Rita Kingsley
6774 Willow Wood Drive #1102
Boca Raton FL 33434

TITLE AS
NAME KINGSLEY, WILLIAM
STREET ADDRESS 20477 LINKS VIEW WAY
CITY-ST-ZIP BOCA RATON FL 33434

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change ☒ Addition ☐
6774 Unit 1102 Willow Wood Drive

TITLE Pres
NAME Charles Kiri Golden
STREET ADDRESS 170 Frank St
CITY-ST-ZIP NYC NY 10013

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change ☐ Addition ☒
Pres
Charles Kingsley
6774 Unit 1102 Willow Wood Drive
Boca Raton FL 33434

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change ☐ Addition ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change ☐ Addition ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: Rita Kingsley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 6/10/99
Daytime Phone # 564-873-4000

CR2E034 (1/98)