FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # POAGGOODSBRR

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90070 049 ***150.00

1. Corporation	Name 1 3 TOOO	02000	,0			1			
CORAL P	RIDGE OFFICE CENTER, IN	G.							
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	•								
Principal Place of Business Mailing Address					···			ANI AIISI LEIG	19191 1811 1881
3696 N FEDERAL HWY SUITE 200 SUITE 200									
FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						03/30/1994			<u></u>
2. Principal Pl	ace of Business	2a. Mailing	2a. Mailing Address			4. FEI Number	Ar	oplied For	
21		26	26			65-0480013		No.	ot Applicable
Suite, Apt. #, etc.		Suite,	Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional
22	· · · · · · · · · · · · · · · · · · ·	27			5. Octaleate of States Boomes	<u> </u>	Fee Re	equired	
City & State)	City &	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees				
Zip Country		Zip	Zip Country			8. This corporation owes the current year Intangible			
24	25	29	30			Personal Property Tax.		☐ Yes	No
	9. Name and Address of Curren	t Registered A	Agent			10. Name and Address of New F	tegistered /	\gent	
				81	Name				
MORGAN, GEORGE A JR.				82	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
3696 N FEDERAL HWY								.	
SUITE 200									
FT LAUDERDALE FL 33308					City	***		85 Zip	Code
					City		FL		
11. Pursuant i	to the provisions of Sections 607.050	2 and 607.1508	8, Florida Statutes, t	he above	-named corp	poration submits this statement for the	purpose of	changing its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obligat	of Florida. Suci	h change was autho	rized by	the corporation	on's board of directors. I hereby accep	ot the appoir	itment as re	egistered
_	in lamiliar with, and accept the obliga-	lions or, Section	11 007:0000, 1 101104	Ollinoo	•				
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable	le. (NOTE: Regi	stered Ager	t signature require	d when rainstating)	DATE		
12.	OFFICERS AN			13		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	
TITLE	D		☐ DELETE	1.1 TITLE				Change	☐ Addition }
NAME	T-4			1.2 NAME					1
STREET ADDRESS	COOK N. FEDERAL LEAST CHUTT COOK			1.3 STREET ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL 33308			1.4 CITY-S	T-ZIP				
TITLE	TI DIODENDALE I E 0000		DELETE	2.1 TITLE				Change	☐ Addition
NAME			_	2.2 NAME					
				2.3 STREET	ADDRESS				
STREET ADDRESS	i .			2.4 CITY-5			Ţ.	_	
CITY-ST-ZIP			DELETE	3.1 TITLE	r-Dr			Change	☐ Addition
TITLE				3.2 NAME					Į
NAME									
STREET ADDRESS					FADORESS		,		
CITY-ST-ZIP			3.4. CITY-S	11-2117			☐ Change	Addition	
TITLE	·		4.1 TITLE						
NAME				4. 2 NAME					
STREET ADDRESS					ADDRESS	_			
CITY-ST-ZIP				4.4 CITY-S	T-ZIP	<u> </u>		Chanca	Addition
TITLE			☐ DELÉTÉ	5.1 TITLE				☐ Change	☐ ₩ddilloii
NAME	•			5.2 NAME		•			
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP				5.4 CITY-S	T-ZIP				

CITY-ST-ZIP 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

REGeorge A. Morgan, Jr.

DELETE

(954) 563-8600

☐ Change

☐ Addition