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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90061 004 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT # **P94000036439**

ST-7IP

officer or director of the corporation or the receiver or trustee empowered to Block 12 or Block 13 if changed, or on an attachment with an address. With

WILLIAM ROBERTS, INC.

ipai Place of Business	Mailing Address							
N.W. 17TH AVE.	1395 N.W. 17TH AVE.				[
#112 STE. #112					DO'NOT WRITE II	N THIS S	PACE	
BEACH FL 33445	DELRAY BEACH FL 33445 US				3. Date Incorporated or Qualifed			
	03				05/13/1994			
incipal Place of Business	2a. Mailing Address				4. FEI Number		An	plied For
incipal Place of Business					65-0504895		_ 	t Applicable
	Suite, Apt. #, etc.				05-0504035		\$8.75 A	
uite, Apt. #, etc.	<u> </u>				5. Certifcate of Status Desired		Fee Re	
	City & State				A Florida Compains			<u></u>
ty & State	├- ┐ '	├-, '			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
	28	Zip Country				oor Into		
Country	— ·				This corporation owes the current y Personal Property Tax.		Yes	□No
25	29	30			10. Name and Address of New Regis			
9. Name and Address of	Current Registered Agent		81	Name	10. Haine and Address of New Adgres	310100 F	go	
VATECH DODEDT			٠.۱	Maine				
KATSCH, ROBERT		Ī	82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
7610 SOLIMAR CIRCLE			_		<u> </u>			
BOCA RATON FL 33433			83					
		}	84	City			85 Zip (Code
			٠.	O.L.		FL		
Signature, typed or printed name of region			ngen	signature required	ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 12
,	ERS AND DIRECTORS	13.		 _	ADDITIONS/CHANGES TO OFFICE		Change	Addition
DPT	☐ DELETE	. 1.1 TITI			ATSCH ROBGET. A			
KATSCH, ROBERT A		1.2 NA		^,	34 VIA DESTE DELRAY BEACH.FL			
7610 SOLMAR CIRCLE				ADDRESS /	TELLOW TO A	~~	س	
T ZIP BOCA RATON FL 33433		1,4 CIT		-ZIP	DECKIT BEACH. FL	133	☐ Change	☐ Addition
DS	☐ DELETE	2.1 TIT	LE				☐ Change	☐ ¥0000001
KATSCH, WILLIAM J		2.2 NA	ME					
18269 OCEAN MIST DR		2 3 STF	REET	ADDRESS				
T ZIP BOCA RATON FL.		2. 4 Ci		-ZIP			r7.01	- Addition
	☐ DELETÉ	3.1 TIT	LE				Change	☐ Addition
		3.2 NAI		-				
LADORESS		3 3 STI	REET	ADDRESS				
T-ZIP		3.4. CI		r-ZIP			C7.0L	
	☐ DELETE	4.1 TIT	LE				Change	☐ Addition
		4, 2 NA	ME.					
TADDRESS				. 1				
T-2)P		4.3 ST	REET	ADDRESS				
		4.3 STI 4.4 CIT						
1	DELETE	4.4 CIT 5.1 TIT	Y-ST				☐ Change	Addition
		4.4 CIT 5.1 TIT 5.2 NA	Y-ST LE ME	- ZIP			☐ Change	Addition
I ADIRAT SES	□ DELETE	4.4 CIT 5.1 TIT 5.2 NA	Y-ST LE ME				☐ Change	Addition
	DELETE	4.4 C/T 5.1 TIT 5.2 NAI 5.3 STI 5.4 C/T	Y-ST LE ME REET Y-ST	ADDRESS				
T AINER 12:	☐ DELETE	5.1 TIT 5.2 NA 5.3 STI 5.4 CIT 6.1 TIT	Y-ST LE ME REET Y-ST	ADDRESS			☐ Change	☐ Addition
	_	4.4 C/T 5.1 TIT 5.2 NAI 5.3 STI 5.4 C/T	Y-ST LE ME REET Y-ST	ADDRESS				

6.4 CITY-ST-ZIP

In 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